No. W 64864		Due no later than Jul 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		0	384 STORM SAGLE ID	KENNETH O LARSON 384 STORMCLOUD DR SAGLE ID 83860 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
200 20 2	Names and Addres	ses of at least one Member or Manager.	C 11				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	I O LARSON TH L LARSON	PO BOX 1110 PO BOX 1110	SAGLE SAGLE	ID ID		83860 83860	
5. Organized Under the Laws of:	6. Annual Rep	6. Annual Report must be signed.*					
ID	Signature: I	Kenneth O Larson		Date: 06/30/2015			
W 64864	Name (type	or print): Kenneth O Larson		Title: manager			
Processed 06/30/2015	* Electronically	* Electronically provided signatures are accepted as original signatures.					