

No. W 2143		Due no later than Feb 28, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. L. NEWMAN LLC L LAVAR NEWMAN 2943 N 800 E MONTEVIEW ID 83435		L LAVAR NEWMAN 2943 NORTH 800 EAST MONTEVIEW 83435			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
MANAGER	L LAVAR NEWMAN	2941 N 800 E		MONTEVIEW	ID	83435	
5. Organized Under the Laws of: ID W 2143		6. Annual Report must be signed.* Signature: LaVar Name (type or print): LaVar Date: 01/26/2015 Title: Newman					
Processed 01/26/2015 * Electronically provided signatures are accepted as original signatures.							