

No. <b>W 113903</b>	<b>Due no later than May 31, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		SHIRLENE HARRISON 4940 N HAWK WING LN EAGLE ID 83616			
	ADH, LLC SHIRLENE HARRISON 4940 N HAWK WING LN EAGLE ID 83616		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
MEMBER	SHIRLENE HARRISON	4940 N HAWK WING LN	EAGLE	ID	USA	83616
5. Organized Under the Laws of:  <b>ID</b> <b>W 113903</b>		6. Annual Report must be signed.* Signature: Shirlene Harrison Name (type or print): Shirlene Harrison		Date: 06/19/2015 Title: Member		
Processed 06/19/2015		* Electronically provided signatures are accepted as original signatures.				