No. W 100866 Return to:		Due no later than Feb 28, 2015 Annual Report Form	2	2. Registered Agent and Address (NO PO BOX) TRAVIS CONDER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if nee LEASE TO OWN AUTO LLC 458 N STATE SHELLEY ID 83442	_	338 S MILTON AVE SHELLEY 83274 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
200	anies: Enter Nar	nes and Addresses of at least one Member or Manage	er.				
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
MEMBER	TRAVIS CON	NDER 458 N STATE		SHELLEY	ID	USA	83274
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Travis Conder	Date: 03/19/2015				
W 100866		Name (type or print): Travis Conder		Title: manager			
Processed 03/19/2015 * Electronically provided signatures are accepted as original signatures.							