

No. W 32003		Due no later than Jul 31, 2014 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. CONNOLLY PLUMBING VALLEY COUNTY, LLC L CONNOLLY III 606 WOOLEY AVE MC CALL ID 83638		KEVIN CHAPMAN #7 WILLOW WAY CASCADE ID 83611			
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 MANAGER	Name PATRICK L CONNOLLY III	Street or PO Address PO BOX 888		City CASCADE	State ID	Country USA	Postal Code 83611
5. Organized Under the Laws of: ID W 32003		6. Annual Report must be signed.* Signature: Patrick Name (type or print): Patrick Date: 08/25/2014 Title: Manager					
Processed 08/25/2014 * Electronically provided signatures are accepted as original signatures.							