No. W 29079		Due no later than Mar 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SLKF, LLC LEE ANN HOSTETLER PO BOX 915 LEWISTON ID 83501 USA		1407 16TH A SUITE A LEWISTON				
NO FILING FEE IF RECEIVED BY DUE DATE								
200	ies: Enter Nar	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	PAUL D SCHRETTE JOSEPH V LEE		PO BOX 915 PO BOX 915	LEWISTON LEWISTON	ID ID	USA	83501 83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 29079		Signature: Paul D Schrette Date: 01/20/2015						
		Name (type	or print): Paul D Schrette		Title: President			
Processed 01/20/2015 * Electronically provided signatures are accepted as original signatures.								