

No. <b>W 91364</b>		<b>Due no later than Mar 31, 2014</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>1. Mailing Address: Correct in this box if needed.</b>  SNAKE RIVER LAWN SERVICES, LLC. KELLI MCHONE 924 E GARFIELD AVE GLENNS FERRY ID 83623		KELLI MCHONE 924 E GARFIELD AVE GLENNS FERRY ID 83623			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name KELLI MCHONE	Street or PO Address 924 E GARFIELD AVE		City GLENNS FERRY	State ID	Country USA	Postal Code 83623
5. Organized Under the Laws of:  <b>ID</b> <b>W 91364</b>		6. Annual Report must be signed.*  Signature: Kelli Mchone Name (type or print): Kelli Mchone  Date: 02/14/2014 Title: Manager					
Processed 02/14/2014      * Electronically provided signatures are accepted as original signatures.							