No. W 69208		Due no later than Dec 31, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE		Annual Report Form 1. Mailing Address: Correct in this box if needed.		KATHERYN ROBINSON 505 E KEARNEY ST CALDWELL ID 83605 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	RAYHEL LLC LES R ROBINSON 505 E KEARNEY ST		CALDWELL I				
NO FILING FEE IF RECEIVED BY DUE DATE	CALDWELL ID	CALDWELL ID 83605					
4. Limited Liability Companies: Enter	Names and Addresse	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	N ROBINSON	505 E KEARNEY ST	CALDWELL	ID	USA	83605	
MANAGER LES R R	DBINSON	505 E KEARNEY ST	CALDWELL	ID	USA	83605	
5. Organized Under the Laws of: 6. Annual Report		must be signed.*					
ID.	Signature: Les	Signature: Les Robinson		Date: 01/20/2014			
W 69208	Name (type o	Name (type or print): Les Robinson		Title: Manager			
Processed 01/20/2014	* Electronically p	* Electronically provided signatures are accepted as original signatures.					