

|  |                  |   |      |   |                     |
|--|------------------|---|------|---|---------------------|
| No. <b>W 19684</b>   |                  | <b>Due no later than Jun 30, 2015</b>                                     |      | 2. Registered Agent and Address <b>(NO PO BOX)</b>          |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b>   |      | SCOTT LANTEFIELD<br>5142 N HIGH PRAIRIE PL<br>STAR ID 83669 |                     |
|  |                  | <b>1. Mailing Address: Correct in this box if needed.</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  | Name             | Street or PO Address  | City | State   | Country Postal Code |
| MEMBER   | SCOTT LANTEFIELD | 5142 N HIGH PRAIRIE PL  | STAR | ID  | 83669               |
| MEMBER   | LAURA LANTEFIELD | 5142 N HIGH PRAIRIE PL  | STAR | ID  | 83669               |
| 5. Organized Under the Laws of:  |                  | 6. Annual Report must be signed.*   |      |   |                     |
| <b>ID<br/>W 19684</b>  |                  | Signature: Laura Lantefield   |      | Date: 05/29/2015  |                     |
|  |                  | Name (type or print): Laura Lantefield                                    |      | Title: Member   |                     |
| Processed 05/29/2015   |                  | * Electronically provided signatures are accepted as original signatures. |      |   |                     |