

No. W 59313	Due no later than Feb 28, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MARY M BONAR 103 W PACIFIC SANDPOINT ID 83864
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MACHAVEN, L.L.C. PO BOX 60 SANDPOINT ID 83864		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Mary M. Bonar	PO Box 60	Sandpoint	Idaho	Bonner	83864
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Harold C. Bonar	626 N. 202nd Place	Shoreline	Wa.	King	98133
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	John L. Bonar	PO Box 60	Sandpoint	Idaho	Bonner	83864
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;"> IDAHO W 59313 </div>	6. Signature: _____ Date: _____ <div style="display: flex; justify-content: space-between;"> <div> Name (type or print): <u>MARY M. BONAR</u> </div> <div> Title: <u>man.</u> </div> </div>
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