No. <b>W 111925</b>		Due no later than Mar 31, 2015		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			DAVID RESESKA			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ULEDA LIMITED LIABILITY COMPANY RANDY THORESON 521 N FOURTH ST SANDPOINT ID 83864			521 N FOURTH ST SANDPOINT 83864  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies	s: Enter Nar	mes and Addresses	of at least one Member or Manager.					
Office Held N	lame		Street or PO Address		City	State	Country	Postal Code
MANAGER R	RANDY B THORESON		521 NTH 4TH AVE		SANDPOINT	ID	USA	83864
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Randy Thoreson			Date: 04/16/2015			
W 111925		Name (type or print): Randy Thoreson			Title: Manager			
Processed 04/16/2015 * Electronically provided signatures are accepted as original signatures.								