No. W 94019		ı	Due no later than Jun 30, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SALLY SUMERLIN REEL			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. S.S. REEL CONSULTING, PLLC SALLY S REEL 3726 21ST ST E LEWISTON ID 83501		LEWISTON I	3726 21ST ST E LEWISTON ID 83501 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	anies: Enter N	ames and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	SALLY S F	REEL	3726 21ST STREET E	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Sally Reel		[Date: 04/28/2013			
W 94019		Name (type	or print): Sally Reel	٦	Title: Manager			
Processed 04/28/2013 * Electronically provided signatures are accepted as original signatures.								