

No. W 30649	Due no later than May 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. EVANS FINANCIAL & INSURANCE LLC KIM EVANS 8660 W EMERALD ST SUITE 182 BOISE ID 83704		KIM EVANS 8660 W EMERALD ST SUITE 182 BOISE ID 83704			
			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	KIM EVANS	8660 W EMERALD ST SUITE 182	BOISE	ID	USA	83704
MEMBER	SUSAN EVANS	8660 W EMERALD ST SUITE 182	BOISE	ID	USA	83704
5. Organized Under the Laws of: ID W 30649	6. Annual Report must be signed.* Signature: Kim Evans Name (type or print): Kim Evans		Date: 07/31/2012 Title: Member			
Processed 07/31/2012		* Electronically provided signatures are accepted as original signatures.				