

No. W 15097	Due no later than Apr 30, 2015 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.		ALL DAY \$49 IDAHO REGISTERED A 1900 NORTHWEST BLVD STE 106A COEUR D ALENE 83814			
	ORVIETO, LLC MAUREEN K OCONNELL 601 BELMONT AVE E, APT D2 SEATTLE WA 98102-4889 USA		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
MANAGER	MAUREEN KAY OCONNELL	PO BOX 3283	HAILEY	ID		83333
5. Organized Under the Laws of: ID W 15097		6. Annual Report must be signed.* Signature: Maureen Kay Oconnell Name (type or print): Maureen Kay Oconnell Date: 03/31/2015 Title: Managing Member				
Processed 03/31/2015		* Electronically provided signatures are accepted as original signatures.				