No. <b>W 56375</b>		Due no later than Nov 30, 2013		2. F	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CHAD J VAUGHN 2829 N CITRUS PL BOISE ID 83713  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  POND ST. PARTNERS, LLC CHAD VAUGHN PO BOX 8384 BOISE ID 83707 USA						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Com	npanies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	Ci	ty	State	Country	Postal Code
MANAGER	MANAGER CHAD J VAUGHN		2829 N CITRUS PL	ВС	DISE	ID	USA	83713
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 56375		Signature: Christina Vaughn			Date: 10/14/2013			
		Name (type or print): Christina Vaughn			Title: Manager			
Processed 10/14/2013 * Electronically provided signatures are accepted as original signatures.								