

No. W 34580		Due no later than Nov 30, 2014		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. GARGLEFISH, LLC LYNETTE C BRICE 233 E JACKSON AVE PRIEST RIVER ID 83856		LYNETTE C BRICE 233 E JACKSON AVE PRIEST RIVER 83856	
				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	LYNETTE C BRICE	PO BOX 1740	PRIEST RIVER	ID	83856
MEMBER	DAVID A BRICE	PO BOX 1740	PRIEST RIVER	ID	83856
5. Organized Under the Laws of: ID W 34580		6. Annual Report must be signed.* Signature: David A Brice Name (type or print): David A Brice Date: 10/31/2014 Title: member			
Processed 10/31/2014		* Electronically provided signatures are accepted as original signatures.			