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| No. W 126949 | Due no later than Jul 31, 2014 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. BENES ENTERPRISES, LLC PATRICIA A. BENES 206 S PARKWOOD PL POST FALLS ID 83854 | PATRICIA BARNES 206 S PARKWOOD PL POST FALLS ID 83854-7009 | | | | |
| | | 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 | PATRICIA ANN BENES | 206 S. PARKWOOD PLACE | POST FALLS | ID | USA | 83854-7009 |
| 5. Organized Under the Laws of: ID W 126949 | 6. Annual Report must be signed.* Signature: Patricia A. Benes Name (type or print): Patricia A. Benes | | Date: 05/18/2014 Title: Officer | | | |
| Processed 05/18/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | |