

No. <b>W 77985</b>	<b>Due no later than Sep 30, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> SARAH EDMUNDS PARALEGAL SERVICES LLC SARAH EDMUNDS 576 S WATERTON AVE EAGLE ID 83616		SARAH EDMUNDS 576 S WATERTON AVE EAGLE ID 83616			
			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	SARAH A EDMUNDS	576 S. WATERTON AVE	EAGLE	ID	USA	83616
5. Organized Under the Laws of:  <b>ID</b> <b>W 77985</b>	6. Annual Report must be signed.* Signature: Sarah Edmunds Name (type or print): Sarah Edmunds		Date: 08/07/2014 Title: Manager/Owner			
Processed 08/07/2014		* Electronically provided signatures are accepted as original signatures.				