No. <b>W 21488</b>		Due no later than Nov 30, 2014	2. Registered Agent and Address (NO PO BOX)  BART LARSEN 3539 BRIAR CREEK STE A IDAHO FALLS 83406  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  BL & COMPANY, LLC  BART LARSEN  3539 BRIAR CREEK STE A  IDAHO FALLS ID 83406				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Fater Ner		nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	BART LARSE	N 3539 BRIAR CREEK	IDAHO FALLS	ID	<b>,</b>	83406
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Bart Larsen	Date: 12/11/2014			
W 21488		Name (type or print): Bart Larsen	Title: Owner Operater			
Processed 12/11/2014	sed 12/11/2014 * Electronically provided signatures are accepted as original signatures.					