No. <b>W 115107</b>		Due no later than Jun 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		BRIAN LUNDQUIST			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	STUDIO STAII BRIAN LUNDO 2219 W BISON	1. Mailing Address: Correct in this box if needed. STUDIO STAINED GLASS, LLC BRIAN LUNDQUIST 2219 W BISON DR BOISE ID 83703		2219 W BISON DR BOISE ID 83703  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: E	nter Names and Addresse	es of at least one Member or Manager.					
Office Held Nam	e	Street or PO Address	City	State	Country	Postal Code	
MANAGER BRIAN LEE LUNDQUIST		2219 WEST BISON DRIVE	BOISE	ID	USA	83703	
5. Organized Under the Laws of	: 6. Annual Repor	6. Annual Report must be signed.*					
ID	Signature: Bri	Signature: Brian Lundquist		Date: 04/24/2015			
W 115107	Name (type o	Name (type or print): Brian Lundquist		Title: Manager			
Processed 04/24/2015	* Electronically p	* Electronically provided signatures are accepted as original signatures.					