

No. W 94757		Due no later than Jul 31, 2013		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		ROBERT C MONTGOMERY 2160 TWIN RAPIDS WAY BOISE ID 83680			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		SILVERSTONE INSURANCE, LLC KATHRYN A SMITH 2119 W ROOT CREEK MERIDIAN ID 83646 USA					
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	KATHRYN A SMITH	2119 W ROOT CREEK	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 94757		Signature: Kathryn A. Smith				Date: 05/23/2013	
		Name (type or print): Kathryn A. Smith				Title: Owner	
Processed 05/23/2013		* Electronically provided signatures are accepted as original signatures.					