No. <b>W 28506</b>	Due no later than Feb 28, 2015	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		WILLIAM A WATTS 834 E 1430 N SHELLEY 83274  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  LASER INK LLC  WILLIAM A. WATTS  PO BOX 50641	55				
NO FILING FEE IF RECEIVED BY DUE DATE	IDAHO FALLS ID 83405 USA	3. <u>New</u> Registe				
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 WILLIAM A MANAGER LINDA S		SHELLEY SHELLEY	ID ID		83274 83274	
5. Organized Under the Laws of: 6. Annual Report must be signed.*						
ID	Signature: Linda Watts		Date: 02/04/2015			
W 28506	Name (type or print): Linda Watts		Title: Manager			
Processed 02/04/2015	* Electronically provided signatures are accepted as original signatures.					