No. W 47469		Due no later than Feb 28, 2014 2. Registered Agent and Address (NO PO BO		BOX)
Return to:		Annual Report Form	SCOTT FISH 570 E 15TH N MOUNTAIN HOME ID 83647 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. STF LAWN CARE LIMITED LIABILITY COMPANY SCOTT FISH PO BOX 382 MOUNTAIN HOME ID 83647		
NO FILING FEE IF RECEIVED BY DUE DATE				
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
	SCOTT FISH ANGELA E F			83647 83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*		
ID W 47469		Signature: Angela E Fish Date: 02/28/2014		
		Name (type or print): Angela E Fish Title: Partner		
Processed 02/28/2014	rocessed 02/28/2014 * Electronically provided signatures are accepted as original signatures.			