

No. W 100487	Due no later than Feb 28, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JULIE PAYNE 360 N 2 nd West (Not South) BLOOMINGTON ID 83223 <i>Thanks</i>
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. BEAR LAKE BLOOMINGTON RETREAT LLC JULIE PAYNE P.O. BOX 266 BLOOMINGTON ID 83223 USA		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> Julie Payne 360 N. 2 nd W. Bloomington ID USA 83223			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> IDAHO W 100487 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature: <i>Julie Payne</i> <hr/> Name (type or print): Julie Payne </div> <div> Date: <i>12-23-13</i> <hr/> Title: <i>12-23-13</i> </div> </div>	
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