No. W 18427		Due no later than Mar 31, 2015	2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form	L S NICKERSON					
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if ne LBRB ENTERPRISES, LTD. CO. LS NICKERSON PO BOX 253 GENESEE ID 83832		214 W HAZEL GENESEE 83832 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Com	panies: Enter Nar	mes and Addresses of at least one Member or Manag	er.					
Office Held	Name	Street or PO Address		City	State	Country	Postal Code	
MANAGER L.S. NICKER		SON PO BOX 253		GENESEE	ID		83832	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: LS Nickerson			Date: 02/24/2015			
W 18427		Name (type or print): LS Nickerson		Title: Manager				
Processed 02/24/2015 * Electronically provided signatures are accepted as original signatures.								