

No. W 139045	Due no later than Jun 30, 2015 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) DAVID B HEINEN 250 E HOMESTEAD DR APT #302 VICTOR ID 83455
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. TETON RIVER SHUTTLE SERVICE LLC DAVID B HEINEN 250 E HOMESTEAD DR APT #302 VICTOR ID 83455		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"/>	DAVID B. HEINEN	250 E. HOMESTEAD DR. APT. #302 -	VICTOR,	ID.	-	TETON - 83455
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DAVID S. HEINEN	P.O. Box 1078 -	DRIGGS,	ID.	-	TETON - 83422
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;">IDAHO W 139045</div>	6. Signature: <u>David B. Heinen</u> Date: <u>04/27/15</u> <hr/> Name (type or print): <u>DAVID B. HEINEN</u> Title: <u>PRESIDENT</u>
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