

No. W 15062		Due no later than Apr 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		SHAUNA HOLST 10126 N YELLOWSTONE IDAHO FALLS 83401			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		HOLST INSTALLATION SHOP, LLC SHAUNA L HOLST PO BOX 486 UCON ID 83454-0486 USA					
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	JON SCOTT HOLST	PO BOX 126	UCON	ID		83454	
MANAGER	SHAUNA LEE HOLST	P.O. BOX 486	UCON	ID	USA	83454	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 15062		Signature: Shauna L. Holst			Date: 02/16/2015		
		Name (type or print): Shauna L. Holst			Title: manager		
Processed 02/16/2015		* Electronically provided signatures are accepted as original signatures.					