

|  |             |   |               |   |                     |
|--|-------------|---|---------------|---|---------------------|
| No. <b>W 83132</b>   |             | <b>Due no later than Apr 30, 2015</b>   |               | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |             | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>EMERGENCY ROADSIDE SERVICE LLC<br>ROBBY BANTA<br>130 NW WILCOX DR<br>MOUNTAIN HOME ID 83647 |               | ROBERT BANTA<br>130 NW WILCOX DR<br>MOUNTAIN HOME 83647 |                     |
|  |             |   |               | 3. <u>New</u> Registered Agent Signature:*              |                     |
| 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  | ROBBY BANTA | 130 NW WILCOX DR  | MOUNTAIN HOME | ID  | USA 83647           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 83132</b>   |             | 6. Annual Report must be signed.*<br>Signature: robbybanta<br>Name (type or print): robbybanta<br>Date: 02/17/2015<br>Title: owner  |               |   |                     |
| Processed 02/17/2015   |             | * Electronically provided signatures are accepted as original signatures.   |               |   |                     |