No. <b>W 113863</b>		Due no later than May 31, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  APER ET LEONES LLC.  KEVIN PATRICK CASSIDY  727 SHOSHONE STREET N  TWIN FALLS ID 83301		PATRICIA L 727 SHOSHO TWIN FALLS	PATRICIA L CASSIDY 727 SHOSHONE STREET N TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar			s of at least one Member or Manager.					
Office Held	Name	CIV CACCIDIV	Street or PO Address	City	State	Country	Postal Code	
MANAGER	KEVIN PATRI	CK CASSIDY	727 SHOSHONE STREET NORTH	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 113863		Signature: Kev		Date: 03/24/2014				
		Name (type or print): Kevin P. Cassidy			Title: Manager			
Processed 03/24/2014	;	* Electronically provided signatures are accepted as original signatures.						