No. <b>W 53713</b>	Due no later than Aug 31, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ANGELA R MARSHALL			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  EAGLE DRUG AND ALCOHOL TESTING LLC  DIANE M HOLMAN  PO BOX 2457  SANDPOINT ID 83864		CONT. 2000000000000000000000000000000000000	111 S THIRD ST STE 30 SANDPOINT ID 83864			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			SANDPOINT	SANDFOINI ID 65604			
			3. <u>New</u> Registere	3. New Registered Agent Signature:*			
NO FILING FEE IF USA RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER DIANE MAR	Y HOLMAN	PO BOX 2457	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:	nized Under the Laws of:  6. Annual Report must be signed.*						
ID	Signature: Dia		Date: 06/10/2014				
W 53713	Name (type o		Title: Manager				
Processed 06/10/2014	* Electronically provided signatures are accepted as original signatures.						