No. W 8889		Due no later than May 31, 2015		2.	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. RIP ENTERPRISES, LLC THOMAS F RIPKE 2080 TABLE ROCK RD BOISE ID 83712 USA			CHRISTOPHER J BEESON 277 N 6TH ST STE 200 BOISE 83702 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses of a	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	THOMAS F	RIPKE	100 N 9TH ST STE 200	Е	OISE	ID		83702
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Thomas F Ripke			Date: 03/23/2015			
W 8889		Name (type or print): Thomas F Ripke			Title: Manager			
Processed 03/23/2015 * Electronically provided signatures are accepted as original signatures.								