



Idaho Limited Liability Company Annual Report Form

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Dort Form Return completed form within 30 days (6):

Idaho Secretary of State

Annual Report: No filing fee if received by the due date.					Attn: Ann 450 North	0 6/	
					Boise, ID 83720 Phone: (208) 334-2300		07/2
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SOS Control N	umber: 128572	Filing Sta	atus: Active-E	xisting			2 N
Limited Liability Company (D) Date			e Formed: 04/19/2005 Fo			Formation Locale: ID	
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2738 W DEERF							23
EAGLE, ID 836	516-2339						ъ
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Registered Age	ent (RA) and Registere	ed Office (RO)	Address:	(2) Cha	ange RA and/or	RO Address:	रू 0
MICHAEL TUR							ũ
2738 W DEERF							cei∨e
EAGLE, ID 836	316						<u>~</u>
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	Note: The Regi	stered Office addr	ess must be a pl	hvsical Idaho	o address (no	postal box).	λq
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(3) New Regist	ered Agent (RA) Signa		agent is appointed	in stam (2) aha	via the new end	ent must sign here to accept i	the encountment
	ty Companies: Enter name accepted. Changes here						
Manager/Member Name			Business Address			City, State, Zip	
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(5) Signature:	mb Jun	<u> </u>		(6) Date	6-4.	1595	
(7) Type/Print Name	= mik Tum	10 IT		(8) Title	· 6-4.	. # 2°5~	Ü O
					17 (-6119	,	M
Instructions: Legi	bly complete the form above.	Sign and date this	form and return t	o the address	s provided abov	/e	-