No. W 37206 Return to:		Due no later than Mar 31, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. ODS, LLC WILLIAM F BAKER 11820 W BOWMONT ST BOISE ID 83713		-	2. Registered Agent and Address (NO PO BOX) WILLIAM F BAKER 11820 W BOWMONT ST BOISE 83713 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				E				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	Cit	ty	State	Country	Postal Code
MANAGER	WILLIAM F	BAKER	11820 W BOWMONT ST	BC	ISE	ID		83713
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: William Baker			Date: 01/16/2015			
W 37206		Name (type or print): William Baker			Title: Manager			
Processed 01/16/2015 * Electronically provided signatures are accepted as original signatures.								