

No. W 69024		Due no later than Nov 30, 2014		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 RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. SCHERR L.L.C. LESTER E SCHERR 333 BIRCH HAVEN DR SAGLE ID 83860 USA		LESTER E SCHERR 333 BIRCH HAVEN DR SAGLE 83860	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	LESTER E SCHERR	333 BIRCH HAVEN DR	SAGLE	ID	83860
MANAGER	CONSTANCE M SCHERR	333 BIRCH HAVEN DR	SAGLE	ID	83860
5. Organized Under the Laws of: ID W 69024		6. Annual Report must be signed.* Signature: Lester E Scherr Name (type or print): Lester E Scherr Date: 12/13/2014 Title: manager			
Processed 12/13/2014		* Electronically provided signatures are accepted as original signatures.			