No. W 123690	Du	Due no later than Mar 31, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		LISA COLLINS				
SECRETARY OF STATE	1. Mailing A	1. Mailing Address: Correct in this box if needed.			163 W 580 S JEROME 83338			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LISA COLLIN	STRATUS COMMUNICATIONS, LLC LISA COLLINS PO BOX 5856 TWIN FALLS ID 83303 USA		JEROIVIE 63336				
	TWIN FALLS			3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	USA							
4. Limited Liability Companies: En	ter Names and Address	es of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
MEMBER JAMES	JAY LONGWELL	PO BOX 5856	TWIN FALLS	ID	USA	83303		
MANAGER LISA I	MARIE COLLINS	PO BOX 5856	TWIN FALLS	ID	USA	83303		
5. Organized Under the Laws of:	6. Annual Repor	t must be signed.*						
ID	Signature: Lis	Signature: Lisa Collins		Date: 03/25/2015				
W 123690	Name (type o	Name (type or print): Lisa Collins		Title: Managing Partner				
Processed 03/25/2015	* Electronically p	* Electronically provided signatures are accepted as original signatures.						