

No. W 64296	Due no later than Jul 31, 2012 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) H DENNIS CLAUNCH 219 E MAIN BURLEY ID 83318																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. DENNIS'S TIRE, LLC 219 E MAIN BURLEY ID 83318		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 25%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>H. Dennis Claunch</td> <td>219 E. Main</td> <td>Burley Id</td> <td>Cassia</td> <td></td> <td>83318</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	H. Dennis Claunch	219 E. Main	Burley Id	Cassia		83318	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> IDAHO W 64296 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-family: cursive;">Dennis Claunch</div> </td> <td style="width: 40%;"> Date: <div style="border-bottom: 1px solid black; padding-bottom: 5px; text-align: center;">9.14.12</div> </td> </tr> <tr> <td> Name (type or print): <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-family: cursive;">DENNIS Claunch</div> </td> <td> Title: <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-family: cursive;">MEMBER</div> </td> </tr> </table>			Signature: <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-family: cursive;">Dennis Claunch</div>	Date: <div style="border-bottom: 1px solid black; padding-bottom: 5px; text-align: center;">9.14.12</div>	Name (type or print): <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-family: cursive;">DENNIS Claunch</div>	Title: <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-family: cursive;">MEMBER</div>																															
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Issued 09/06/2012 by CLH																																						

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM