

ISSUED: 07-04-1995

No. 10	Idaho Limited Liability Company Annual Report Form		2. Registered Agent and Office NOT A.P.O. BOX	
Return To Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 30, 1995		ORLIN V CLEMENTS	
	1 Mailing Address -- Please Correct If Not Correct		834 FALLS AVE	
	CLEMENTS ENGINEERING P.L.L.C. ORLIN V CLEMENTS XXXXXX 1341 Fillmore St. SUITE XXXXX Suite 202 TWIN FALLS ID 83301		SUITE 1020 I TWIN FALLS ID 83301	
3. Organized Under The Laws of			ID	
NO: 10				
4. Names and Addresses of ☒ Managers or ☐ Members (check one) MUST BE PRINTED OR TYPED				
Name	Street or P.O. Address	City	State	Zip
ORLIN V. CLEMENTS	560 Park Terrace Dr.	Twin Falls	ID	83301
5. Signature of the Current Registered Agent (if changed in block 2)		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Orlin V. Clements</u> Date <u>9/7/95</u> (Typed or Printed Name)		