No. W 53157			Due no later than Aug 31, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SCOTT MORRIS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SCOTT MORRIS FRAME & FINISH LLC SCOTT L MORRIS 69 BEAR TRAIL RD SANDPOINT ID 83864			69 BEAR TRAIL RD SANDPOINT ID 83864 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter N	ames and Addres	sses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	C	City	State	Country	Postal Code
MANAGER SCOTT MOR		ORRIS	69 BEAR TRAIL RD	S	ANDPOINT	ID	USA	83864
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Scott Morris			Date: 06/27/2013			
W 53157		Name (type or print): Scott Morris			Title: Manager			
Processed 06/27/2013 * Electronically provided signatures are accepted as original signatures.								