

No. W 4887		Due no later than Oct 31, 2012		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		SUSAN A JACOBUS 23700 TIMBER FLAT RD OLA ID 83657			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		ALLPORTS LLC INTERNATIONAL SUSAN JACOBUS PO BOX 9 OLA ID 83657					
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	
MEMBER	SUSAN JACOBUS	P.O. BOX 9	OLA	ID	USA	83657	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 4887		Signature: Susan Jacobus			Date: 08/15/2012		
		Name (type or print): Susan Jacobus			Title: Member		
Processed 08/15/2012		* Electronically provided signatures are accepted as original signatures.					