

No. W 116988		Due no later than Sep 30, 2015		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 1. Mailing Address: Correct in this box if needed. ALTARASENITA LLC BUTCH WELLS 975 HOLIDAY DR MOUNTAIN HOME ID 83647		IVYL BUTCH WELLS 975 HOLIDAY DR MOUNTAIN HOME ID 83647-8464	
				3. <u>New</u> Registered Agent Signature:*	
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
MANAGER	IVYL BUTCH WELLS	975 HOLIDAY DR	MOUNTAIN HOME	ID	USA 83647
5. Organized Under the Laws of: AZ W 116988		6. Annual Report must be signed.* Signature: Butch Wells Name (type or print): Butch Wells Date: 07/21/2015 Title: Manager			
Processed 07/21/2015		* Electronically provided signatures are accepted as original signatures.			