

No. <b>W 49334</b>	<b>Due no later than Apr 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		JULENE WALKER 2752 SUNDANCE TWIN FALLS 83301			
	SET 2 SELL LLC JULENE WALKER 2752 SUNDANCE TWIN FALLS ID 83301		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	JULENE WALKER	2752 SUNDANCE	TWIN FALLS	ID		83301
MANAGER	BARB HARDY	224 OAK CREEK CIR	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:  <b>ID</b> <b>W 49334</b>	6. Annual Report must be signed.* Signature: julene walker Name (type or print): julene walker		Date: 02/14/2015 Title: Secretary			
Processed 02/14/2015		* Electronically provided signatures are accepted as original signatures.				