No. W 105363		Due no later than Jul 31, 2014		2. Re	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. ROBERT'S RESTORATIONS, LLC SHAWN W ROBERTS 240 CRIMSON IDAHO FALLS ID 83401		24	SHAWN ROBERTS 240 CRIMSON IDAHO FALLS ID 83401			
				3. <u>Ne</u>	3. <u>New</u> Registered Agent Signature:*			
		nes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City		State	Country	Postal Code
MEMBER SHAWN ROE		BERTS	240 CRIMSON	IDAŀ	HO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID W 105363		6. Annual Report must be signed.* Signature: Shawn Roberts Name (type or print): Shawn Roberts				: 08/04/20 : Owner/ I		
Processed 08/04/2014 * Electronically provided signatures are accepted as original signatures.								