

|  |                    |  |  |  |       |         |             |
|--|--------------------|--|--|--|-------|---------|-------------|
| No. <b>W 135220</b>  |                    | <b>Due no later than Mar 31, 2015</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> ) |       |         |             |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                    | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>V HENDO LLC<br>SCOTT HENDERSON<br>11555 WHISPERING CLIFFS<br>POCATELLO ID 83202 |  | DEBRHA CARNAHAN<br>2373 PARKSIDE DR<br>BOISE 83712   |       |         |             |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                    |  |  | 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 |
| MEMBER   | CARLEY D HENDERSON | 11555 W WHISPERING CLIFFS DR   |  | POCATELLO  | ID    | USA     | 83202       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 135220</b>                                |                    | 6. Annual Report must be signed.*<br><br>Signature: CDH<br>Name (type or print): CDH<br><br>Date: 02/26/2015<br>Title: Owner                     |  |  |       |         |             |
| Processed 02/26/2015 * Electronically provided signatures are accepted as original signatures.     |                    |  |  |  |       |         |             |