No. W 2230		Due no later than Mar 31, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. EDMUNDS FAMILY, L.L.C. KEN EDMUNDS 961 WILDWOOD WAY TWIN FALLS ID 83301		961 WILDWO TWIN FALLS	KENNETH D EDMUNDS 961 WILDWOOD WAY TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE			of at least one Manches on Manches					
200 201 2	s: Enter Nar Name	nes and Addresse	es of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code	
MEMBER K	KENNETH D EDMUNDS JANE K EDMUNDS		961 WILDWOOD WAY 961 WILDWOOD WAY	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 2230		Signature: Ke		Date: 02/12/2014				
		Name (type o	r print): Ken Edmunds		Title: Member			
Processed 02/12/2014		* Electronically provided signatures are accepted as original signatures.						