

No. W 23988	Due no later than May 31, 2014 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. 13965 CHINDEN, LLC WESTERN BENEFIT SOLUTIONS 13965 W CHINDEN BLVD #300 BOISE ID 83713		RONALD L KENNEDY 13965 W CHINDEN BOISE ID 83713			
			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	RONALD L KENNEDY	936 CLEARVUE CT	EAGLE	ID	USA	83616
MANAGER	RONALD L OSBORNE	373 THORNWOOD DR	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of: ID W 23988	6. Annual Report must be signed.* Signature: Amanda Rua Name (type or print): Amanda Rua		Date: 03/20/2014 Title: Owner's Agent			
Processed 03/20/2014		* Electronically provided signatures are accepted as original signatures.				