

<b>No. W 4117</b>	<b>Due no later than May 31, 2015</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> RICHARD N MONCUR 100 S 889 E DECLO ID 83323
Return to: SECRETARY OF STATE 450 N 4th STREET 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> LET'S GO DUTCH, LLC BOX 4 DECLO ID 83323		<b>3. <u>New</u> Registered Agent Signature.</b>

**4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Cleone Moncur	P.O. Box 4	Declo,	Idaho,	Cassia	83323
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Richard Moncur	P.O. Box 4	Declo,	Idaho,	Cassia	83323
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 4117</b> </div>	<b>6.</b> Signature: <u>Cleone Moncur</u> Name (type or print): <u>Cleone Moncur</u> Date: <u>5/8/2015</u> Title: <u>Part Owner</u>
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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM