

No. <b>W 30989</b>	<b>Due no later than Jun 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON 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>		REID OLSON 132 SW 5TH AVE STE 100 MERIDIAN ID 83642			
	FCMS LLC REID W OLSEN 132 SW 5TH AVE 100 MERIDIAN ID 83642		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	REID W OLSEN	132 SW 5TH SUITE 100	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:  <b>ID</b> <b>W 30989</b>		6. Annual Report must be signed.* Signature: Reid W. Olsen Name (type or print): Reid W. Olsen Date: 06/11/2015 Title: Member				
Processed 06/11/2015		* Electronically provided signatures are accepted as original signatures.				