No. W 102715	Due no later than Apr 30, 2013	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	WILLIAM A PARSONS			
SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Address: Correct in this box if needed.	137 W 13TH ST BURELY ID 83318			
PO BOX 83720 BOISE, ID 83720-0080	IDAHO 12, L.L.C. MICHAEL L MERRIMAN 7595 E MCDONALD DR STE 130	3. New Registered Agent Signature:*			
	SCOTTSDALE AZ 85250				
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MEMBER PATRICIA L	OLSON 7595 E MCDONALD DR STE 130	SCOTTSDALE	AZ	USA	85250
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
AZ	Signature: Patricia L. Olson	Date: 03/22/2013			
W 102715	Name (type or print): Patricia L. Olson	Title: Member			
Processed 03/22/2013	* Electronically provided signatures are accepted as original signatures.				