

No. W 104707		Due no later than Jul 31, 2014		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. CAMILLA HARRIMAN ENTERPRISES LLC CAMILLA HARRIMAN 15 W MAIN REXBURG ID 83440		CAMILLA HARRIMAN 318 PIONEER RD NO 1503 REXBURG ID 83440			
				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	
MEMBER	CAMILLA HARRIMAN	318 PIONEER ROD NO 1503	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: ID W 104707		6. Annual Report must be signed.* Signature: Camilla Harriman Name (type or print): Camilla Harriman			Date: 08/27/2014 Title: Member		
Processed 08/27/2014		* Electronically provided signatures are accepted as original signatures.					