

No. W 128598	Due no later than Aug 31, 2015 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. KASSA HARTLEY INSURANCE, LLC KASSA L HARTLEY 320 E MAIN ST MIDDLETON ID 83644	KASSA HARLEY 320 E MAIN ST MIDDLETON ID 83644				
		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	KASSA L HARTLEY	320 E MAIN ST	MIDDLETON	ID	USA	83644
5. Organized Under the Laws of: ID W 128598	6. Annual Report must be signed.* Signature: Kassa Hartley Name (type or print): Kassa Hartley Date: 07/20/2015 Title: Manager					
Processed 07/20/2015		* Electronically provided signatures are accepted as original signatures.				