

No. <b>W 42163</b>		<b>Due no later than Aug 31, 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>1. Mailing Address: Correct in this box if needed.</b>  DESIGN SLATE LLC WILLIAM RAWDEN 2908 S. TEABERRY WAY EAGLE ID 83616-6490		WILLIAM RAWDEN 2908 S. TEABERRY WAY EAGLE ID 83616-6490		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MANAGER	Name WILLIAM RAWDEN	Street or PO Address 944 N WOODSTREAM PL	City EAGLE	State ID	Country	Postal Code 83616
5. Organized Under the Laws of:  <b>ID</b> <b>W 42163</b>		6. Annual Report must be signed.*  Signature: William Rawden Name (type or print): William Rawden  Date: 07/03/2015 Title: Manager				
Processed 07/03/2015 * Electronically provided signatures are accepted as original signatures.						