No. W 42822		Due no later than Sep 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SCHLEK LLC ALOYS SCHLEKEWAY 2303 N CURTIS RD BOISE ID 83706		ALOYS SCHLEKEWAY 5089 W ALWORTH STREET STE A BOISE 83714 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at	laast one Member or Manager				
Office Held	Name	nes and Addresses of at	Street or PO Address	City	State	Country	Postal Code
MANAGER ALOYS SCHLEKEN		LEKEWAY	5089 W ALWORTH STREET STE A	BOISE	ID		83714
5. Organized Under the Laws of: ID W 42822		6. Annual Report must be signed.* Signature: ALOYS schlekeway Name (type or print): ALOYS schlekeway		Date: 10/20/2014 Title: manager			
Processed 10/20/2014 * Electronically provided signatures are accepted as original signatures.							