

No. W 104809		Due no later than Jul 31, 2012 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		1. Mailing Address: Correct in this box if needed. ACCOUNT RECOVERY SERVICES, LLC AMBER E. HULSE 590 MAPLE DR REXBURG ID 83440 USA		BRECK H BARTON 70 N CENTER ST SUITE 2 REXBURG ID 83440			
NO FILING FEE IF RECEIVED BY DUE DATE				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	WILLIAM G. HULSE	590 MAPLE DR.	REXBURG	ID	USA	83440	
MEMBER	AMBER E. HULSE	590 MAPLE DR.	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: ID W 104809		6. Annual Report must be signed.* Signature: Amber E. Hulse Name (type or print): Amber E. Hulse					
		Date: 08/27/2012 Title: Member					
Processed 08/27/2012 * Electronically provided signatures are accepted as original signatures.							