

No. W 113530		Due no later than May 31, 2014		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. CAVANAUGH'S PRIEST LAKE OUTFITTERS, LLC MICHAEL BELLES 41 DIVOT DR PRIEST LAKE ID 83856		MICHAEL A BELLES 41 DIVOT DR PRIEST LAKE ID 83856 USA		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	MICHAEL BELLES	4024 CAVANAUGH BAY ROAD	COOLIN	ID	USA	83821	
5. Organized Under the Laws of: ID W 113530		6. Annual Report must be signed.* Signature: Michael Belles Name (type or print): Michael Belles Date: 05/09/2014 Title: Member					
Processed 05/09/2014		* Electronically provided signatures are accepted as original signatures.					