No. W 50123		Due no later than May 31, 2014		2. Registered A	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. SHOEMAKER ENTERPRISES, LLC CRAIG F. SHOEMAKER 5406 TRIPPLE CT		5406 TRIPP NAMPA ID	CRAIG F SHOEMAKER 5406 TRIPPLE CT NAMPA ID 83687			
NO FILING FEE IF RECEIVED BY DUE DATE		NAMPA ID 83687 USA 3. New Registered Agent Signature: * mes and Addresses of at least one Member or Manager.		gnature:*				
Office Held Name		nes and Addresses C	Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	MBER ROBERT S SHOEMAKER JR		4600 ESCALANTE DRIVE 5406 TRIPPLE CT	EAGLE NAMPA	ID ID	USA USA	83616 83687	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 50123		Signature: Craig F. Shoemaker Name (type or print): Craig F. Shoemaker			Date: 03/31/2014 Title: Registered Agent			
Processed 03/31/2014		* Electronically prov	ided signatures are accepted as origina	al signatures.				