

No. <b>W 52725</b>		<b>Due no later than Jul 31, 2014</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>  MIKE SCHRANK LLC DAVID FIALA PO BOX 5064 TWIN FALLS ID 83301 USA		MIKE SCHRANK 1894 FRONTAGE ROAD NORTH WENDELL ID 83355			
<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 MEMBER	Name MIKE SCHRANK	Street or PO Address 1894 FRONTAGE ROAD NORTH		City WENDELL	State ID	Country USA	Postal Code 83355
5. Organized Under the Laws of:  <b>ID</b> <b>W 52725</b>		6. Annual Report must be signed.*  Signature: Mike Schrank Name (type or print): Mike Schrank  Date: 05/28/2014 Title: Member					
Processed 05/28/2014 * Electronically provided signatures are accepted as original signatures.							