No. W 28078	Due no later than Jan 31, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		The second of the second control of the seco	BUSINESS FILINGS INCORPORATED			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	1. Mailing Address: Correct in this box if needed. KATHLEEN ARMSTRONG, CPA, PLLC KATHLEEN Q ARMSTRONG PO BOX 2258 CORSICANA TX 75151 USA			921 S ORCHARD ST STE G BOISE 83705			
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Register	3. New 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 KATHLEEN (Q ARMSTRONG	630 W 5TH AVE	CORSICANA	TX	USA	7515	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: Kath	ure: Kathleen Q. Armstrong		Date: 12/19/2014			
W 28078	Name (type or print): Kathleen Q. Armstrong			Title: Member/Owner			
Processed 12/19/2014	* Electronically provided signatures are accepted as original signatures.						