

No. W 94058	Due no later than Jun 30, 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. SPRINKLERS DIRECT, LLC KEVIN ARAVE 12541 N 95 E IDAHO FALLS ID 83401	KEVIN ARAVE 12541 N 95 E IDAHO FALLS ID 83401				
		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	SHARON B ARAVE	12541 N 95 E	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID W 94058	6. Annual Report must be signed.* Signature: Kevin Arave Name (type or print): Kevin Arave Date: 04/13/2014 Title: Registered Agent Owner					
Processed 04/13/2014		* Electronically provided signatures are accepted as original signatures.				