

No. W 130089	Due no later than Oct 31, 2015 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. SOCCER TIME TWIN FALLS LLC CHAD BABCOCK 1379 N CLOVERDALE RD BOISE ID 83713 USA		WILLIAM WARDWELL 242 N 8TH ST STE 220 BOISE ID 83701			
			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	KATHERINE BABCOCK	1379 N CLOVERDALE RD	BOISE	ID	USA	83713
MEMBER	CHAD BABCOCK	1379 N CLOVERDALE RD	BOISE	ID	USA	83713
5. Organized Under the Laws of: ID W 130089	6. Annual Report must be signed.* Signature: CHAD BABCOCK Name (type or print): CHAD BABCOCK		Date: 09/02/2015 Title: MEMBER			
Processed 09/02/2015		* Electronically provided signatures are accepted as original signatures.				