| No. W 73419 | - 1 | Due no later than Apr 30, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|-------------------------------------|---|---------------------------|---|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | GO-N-MOW MARTY D. 968 LINCOLI | | 968 LINCOLN TWIN FALLS | MARTY JACOBS 968 LINCOLN ST. TWIN FALLS ID 83301 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 2000 200 100 100 100 100 100 100 100 100 | er Names and Addres | ses of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| | D. JACOBS IE L. JACOBS | 968 LINCOLN ST. 968 LINCOLN ST. | TWIN FALLS TWIN FALLS | ID ID | USA USA | 83301 83301 | |
| 5. Organized Under the Laws of: | 6. Annual Rep | 6. Annual Report must be signed.* | | | | | |
| ID | Signature: I | Signature: MARTY D JACOBS Date: 03/30/2016 | | | | | |
| W 73419 | Name (type | or print): MARTY D JACOBS | | Title: AGENT | | | |
| Processed 03/30/2016 | * Electronically | * Electronically provided signatures are accepted as original signatures. | | | | | |