

No. W 95295	Due no later than Aug 31, 2016 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. HILLSIDE AUTO REPAIR LLC TIM OLSEN 158 RIVERVIEW DR BELLEVUE ID 83313		TIMOTHY J OLSEN 158 RIVERVIEW DR BELLEVUE ID 83313			
			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
MANAGER	TIM J OLSEN	158 RIVERVIEW DR	BELLEVUE	ID	USA	83313
5. Organized Under the Laws of: ID W 95295	6. Annual Report must be signed.* Signature: Tim J Olsen Name (type or print): Tim J Olsen		Date: 06/21/2016 Title: Manager			
Processed 06/21/2016		* Electronically provided signatures are accepted as original signatures.				