

No. W 115015	Due no later than Jun 30, 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. A 1 EXPRESS LLC MUROD SHARAFOV 1126 TRAIL CREST RD TWIN FALLS ID 83301 USA		MUROD SHARAFOV 1126 TRAIL CREST RD TWIN FALLS ID 83301			
			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	MUROD SHARAFOV	1126 TRAIL CREST ROAD	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID W 115015	6. Annual Report must be signed.* Signature: Murod Sharafov Name (type or print): Murod Sharafov		Date: 04/21/2015 Title: Manager			
Processed 04/21/2015		* Electronically provided signatures are accepted as original signatures.				