No. <b>W 124475</b>	Due no later than Apr 30, 2014  Annual Report Form		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:				ANGEL EVARISTO RAMIREZ			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  EVARISTO'S CONCIERGE, LLC  ANGEL EVARISTO RAMIREZ  11319 N MEADOW VIEW LANE			11319 N MEADOW VIEW LANE HAYDEN ID 83835			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			HAYDEN ID				
	HAYDEN ID 83835		3. <u>New</u> Registe	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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 ANGEL EVARISTO		11319 N MEADOW VIEW LN	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of:	6. Annual Repor	t must be signed.*					
ID	ID Signature: Angel Evaristo		Date: 02/10/2014				
W 124475	Name (type or print): Angel Evaristo			Title: Owner			
Processed 02/10/2014	* Electronically provided signatures are accepted as original signatures.						