

No. W 45786		Due no later than Dec 31, 2014 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		1. Mailing Address: Correct in this box if needed. DME, LLC MAUREEN R NEVILLE 1343 BRADLEY ST TWIN FALLS ID 83301		MAUREEN LOUCKS 1343 BRADLEY ST TWIN FALLS 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				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	ANNA NEVILLE	390 BUCHANAN ST	TWIN FALLS	ID	USA	83301	
MEMBER	MATTHEW NEVILLE	390 BUCHANAN ST	TWIN FALLS	ID	USA	83301	
MEMBER	SHANNON NEVILLE	390 BUCHANAN ST.	TWIN FALLS	ID		83301	
MEMBER	MARK NEVILLE	3587 N 3000 E	TWIN FALLS	ID		83301	
MEMBER	EILEEN NEVILLE	3301 KIPLING RD	BOISE	ID		83706	
MANAGER	MAUREEN NEVILLE	1343 BRADLEY ST	TWIN FALLS	ID		83301	
5. Organized Under the Laws of: ID W 45786		6. Annual Report must be signed.* Signature: Maureen Neville Name (type or print): Maureen Neville					
		Date: 10/14/2014 Title: manager					
Processed 10/14/2014		* Electronically provided signatures are accepted as original signatures.					