

No. W 20334		Due no later than Aug 31, 2015		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. LLPOF, L.L.C. BARBARA TOMASI 130 GLENDALE RD BELLEVUE ID 83313 USA		BARBARA ROBIN TOMASI 130 GLENDALE RD 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
MEMBER	BARBARA ROBIN TOMASI	PO BOX 179	HAILEY	ID	83333
5. Organized Under the Laws of: ID W 20334		6. Annual Report must be signed.* Signature: BARBARA TOMASI Name (type or print): BARBARA TOMASI Date: 09/16/2015 Title: MEMBER			
Processed 09/16/2015		* Electronically provided signatures are accepted as original signatures.			