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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------|-------------|--|
| No. <b>W 127225</b>                                                                                                                                    |               | <b>Due no later than Jul 31, 2015</b>                                                                                                                                            |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>    |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>RS SERVICES, LLC<br>ROBERT D HARDY<br>1655 1ST ST<br>IDAHO FALLS ID 83401-4305 |       | SARAH LYN DAVIS<br>3340 CIRCLE S DR<br>AMMON ID 83406 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                                                  |       | 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                                                                                                                                                 | SARAH L DAVIS | 3340 CIRCLE S DR                                                                                                                                                                 | AMMON | ID                                                    | USA     | 83406       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 127225</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: Robert D Renna<br>Name (type or print): Robert D Renna<br>Date: 05/18/2015<br>Title: Staff CPA                                   |       |                                                       |         |             |  |
| Processed 05/18/2015                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                        |       |                                                       |         |             |  |