No. W 90834	Due no later than Feb 28, 2015	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address: Correct in this box if needed.		ROBERT MITCHELL 28264 PARMA RD			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	R & L MITCHELL ENTERPRISES, LLC LINDA MITCHELL 28264 PARMA RD	PARMA 83660				
	PARMA ID 83660	3. <u>New</u> Regist	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter N	lames and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER LINDA MI		PARMA	ID	USA	83660	
MEMBER MITCHELL	28264 PARMA RD	PARMA	ID	USA	83660	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: Linda Mitchell	Date: 01/08/2015				
W 90834	Name (type or print): Linda Mitchell		Title: member			
Processed 01/08/2015	* Electronically provided signatures are accepted as original signatures.					