No. W 112322		Due no later than Mar 31, 2014		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. TWO WHEELS TAVERN LLC ROBERT S GINES 1225 N MAIN		ROBERT S GINES 1225 N MAIN POCATELLO ID 83201				
NO FILING FEE IF RECEIVED BY DUE DATE		POCATELLO ID 83201 3. New Registered Agent Signature:*						
4. Limited Liability Compar	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER ROBERT S C		GINES	1225 N MAIN		POCATELLO	ID	USA	83201
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Robert S Gines			Date: 04/22/2014			
W 112322		Name (type or print): Robert S Gines			Title: Member			
Processed 04/22/2014		* Electronically provided signatures are accepted as original signatures.						