| No. W 111818 | Due no later than Mar 31, 2013 | | 2. Registered Ag | 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. JLF AND ASSOCIATES, L.C. JANIE FREED 12242 N HILINE RD POCATELLO ID 83202 | | 12242 N HILI | JANIE FREED 12242 N HILINE RD POCATELLO ID 83202 3. New Registered Agent Signature:* | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | POCATELLO | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: Enter Na | mes and Addresses of | f at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER CHRISTOPHER Y FREED | | 12242 N HILINE RD | POCATELLO | ID | USA | 83202 | |
| 5. Organized Under the Laws of: 6. Annual Report must be si | | ust be signed.* | | | | | |
| U T | Signature: Janie Freed | | Date: 01 | Date: 01/29/2013 | | | |
| W 111818 | Name (type or print): Janie Freed | | Title: M | Title: Manager / Owner | | | |
| Processed 01/29/2013 | * Electronically provided signatures are accepted as original signatures. | | | | | | |