

No. W 132106		Due no later than Dec 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SWIFT CLAIMS SERVICES, LLC KEN HANSEN 3820 TAYLORVIEW LN IDAHO FALLS ID 83406-8145 USA		KEN HANSEN 3820 TAYLORVIEW LN IDAHO FALLS 83406-8145			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name KEN HANSEN	Street or PO Address 3820 TAYLORVIEW LN		City IDAHO FALLS	State ID	Country USA	Postal Code 83406-8145
5. Organized Under the Laws of: ID W 132106		6. Annual Report must be signed.* Signature: Ken Hansen Name (type or print): Ken Hansen Date: 12/26/2014 Title: Manager					
Processed 12/26/2014 * Electronically provided signatures are accepted as original signatures.							