No. W 55043	No. W 55043 Due no later than Oct 31, 2013			2. Registered Agent and Address (NO PO BOX)			
eturn to:		Annual Report Form	MATTHEW T MACKEY				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				4679 W PRICKLY PEAR DR EAGLE ID 83616			
	EAGLE ID 83616		3. <u>New</u> Registe	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	ames and Addresse	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MATTHEW	T MACKEY	14277 MAYFIELD DR	DRAPER	UT	USA	84020	
MANAGER JOHN W N	ACKEY	4679 W PRICKLY PEAR DR	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: 6. Annual Repor		t must be signed.*					
ID Signa		re: John Mackey		Date: 08/09/2013			
W 55043	Name (type or print): John Mackey			Title: Manager			
Processed 08/09/2013	* Electronically provided signatures are accepted as original signatures.						