

No. W 127299	Due no later than Jul 31, 2015 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CAMLU SPECIALTY AUTO PARTS, LLC 2897 N CITRUS PL BOISE ID 83713		CAMILLA BURNS 2897 N CITRUS PL BOISE ID 83713			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	CAMILLA BURNS	2897 N. CITRUS PLACE	BOISE	ID	USA	83713
5. Organized Under the Laws of: ID W 127299	6. Annual Report must be signed.* Signature: Camilla Burns Name (type or print): Camilla Burns		Date: 07/09/2015 Title: Managing Member			
Processed 07/09/2015		* Electronically provided signatures are accepted as original signatures.				