No. <b>W 130481</b>		Due no later than Oct 31, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JAMES D PARKINSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SNOWCAP IDAHO LLC JAMES D PARKINSON 259 REBECCA AVE REXBURG ID 83440			259 REBECCA AVE REXBURG 83440  3. New Registered Agent Signature:*			
				3. <u>New</u> Regis				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companie	es: Enter Nar	mes and Addresses	of at least one Member or Manager.					
Office Held Name			Street or PO Address	City	State	Country	Postal Code	
			5306 W. HWY. 33 259 REBECCA AVE.	REXBURG REXBURG	ID ID	USA USA	83440 83440	
5. Organized Under the Laws of:		6. Annual Report m						
ID W 130481		Signature: James D Parkinson			Date: 10/30/2014			
		Name (type or p		Title: Manager				
Processed 10/30/2014 * Electronically provided signatures are accepted as original signatures.								