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|--|---------------|---|----------|--|---------|------------------|--|
| No. W 123616 | | Due no later than Mar 31, 2014 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. SHANNON T&S LLC KEITH SHANNON PO BOX 309 HARRISON ID 83833 | | KEITH SHANNON 48407 S HWY 97 HARRISON ID 83833 | | | |
| | | | | 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 | KEITH SHANNON | PO BOX 309 | HARRISON | ID | USA | 83833 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 123616 | | Signature: Keith Shannon | | | | Date: 02/21/2014 | |
| | | Name (type or print): Keith Shannon | | | | Title: Owner | |
| Processed 02/21/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |