

No. W 61324		Due no later than Apr 30, 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. RED CAP, L.L.C. MICHAEL D TRAVELLER PO BOX 249 TWIN FALLS ID 83303-0249 USA		C ALAN HORNER 383 SHOSHONE ST NORTH TWIN FALLS ID 83301			
				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	
MANAGER	C ALAN HORNER	PO BOX 249	TWIN FALLS	ID	USA	83303-0249	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 61324		Signature: Michael D Traveller				Date: 02/28/2014	
		Name (type or print): Michael D Traveller				Title: Accountant	
Processed 02/28/2014		* Electronically provided signatures are accepted as original signatures.					