

No. W 61324		Due no later than Apr 30, 2014 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		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			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name C ALAN HORNER	Street or PO Address PO BOX 249		City TWIN FALLS	State ID	Country USA	Postal Code 83303-0249
5. Organized Under the Laws of: ID W 61324		6. Annual Report must be signed.* Signature: Michael D Traveller Name (type or print): Michael D Traveller Date: 02/28/2014 Title: Accountant					
Processed 02/28/2014 * Electronically provided signatures are accepted as original signatures.							