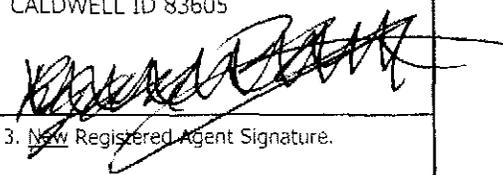


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No. W 88206 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Nov 30, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. TRANSPORTATION UNLIMITED, LLC MANAL A HASBOUN 5206 LASHER LANE CALDWELL ID 83605 USA	2. Registered Agent and Office (NOT A P.O. BOX) MANAL A HASBOUN 5206 LASHER LANE CALDWELL ID 83605  3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Manager or Member</th> <th style="width:20%;">Name</th> <th style="width:20%;">Street or PO Address</th> <th style="width:10%;">City</th> <th style="width:10%;">State</th> <th style="width:10%;">Country</th> <th style="width:15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>RYAN A. NEIBAUR</td> <td>P.O. Box 1549</td> <td>Caldwell</td> <td>ID</td> <td>USA</td> <td>83606</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>MANAL A. Hasboun</td> <td>5206 Lasher Ln.</td> <td>Caldwell</td> <td>ID</td> <td></td> <td>83605</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	RYAN A. NEIBAUR	P.O. Box 1549	Caldwell	ID	USA	83606	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	MANAL A. Hasboun	5206 Lasher Ln.	Caldwell	ID		83605	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 88206 </div>	6. Signature:  <hr/> Name (type or print): <u>MANAL A. HASBOUN</u> <hr/> Date: <u>DEC 8 2014</u> Title: <u>Member</u>																																				
Issued 12/02/2014 by DK1 120514																																					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office

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