

No. W 106249		Due no later than Aug 31, 2013		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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. ALLSBERRY-BOLINGER, L.L.C. PATRICIA M BOLINGER 620 HILLCREST AVE AMERICAN FALLS ID 83211 USA		PATRICIA BOLINGER 620 HILLCREST AVE AMERICAN FALLS ID 83211		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	PATRICIA M BOLINGER	620 HILLCREST AVE	AMERICAN FALLS	ID	USA	83211	
5. Organized Under the Laws of: ID W 106249		6. Annual Report must be signed.* Signature: Patricia M. Bolinger Name (type or print): Patricia M. Bolinger		Date: 06/27/2013 Title: Member			
Processed 06/27/2013		* Electronically provided signatures are accepted as original signatures.					