

No. <b>W 106371</b>	<b>Due no later than Sep 30, 2015 Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> EARL D BROOKS 1716 S 4700 W PLEASANTVIEW ID 83252-6614																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> YA-YA EXPRESS LLC EARL BROOKS PO BOX 99 MALAD ID 83252-0099		3. <u>New</u> 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: 15%;">Name</th> <th style="width: 25%;">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 type="checkbox"/></td> <td>Earl Brooks</td> <td>1716 So. 4700 W.</td> <td>Malad, Id</td> <td>Oreida</td> <td></td> <td>83252</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>BRENDA BROOKS</td> <td>1716 So. 4700 W.</td> <td>Malad, Id</td> <td>Oreida</td> <td></td> <td>83252</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 type="checkbox"/>	Earl Brooks	1716 So. 4700 W.	Malad, Id	Oreida		83252	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	BRENDA BROOKS	1716 So. 4700 W.	Malad, Id	Oreida		83252	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;"> <b>IDAHO</b>  <b>W 106371</b> </div>	6. <table style="width: 100%;"> <tr> <td style="width: 70%;">Signature: <u>Brenda Brooks</u></td> <td style="width: 30%;">Date: <u>30 Aug 2015</u></td> </tr> <tr> <td>Name (type or print): <u>BRENDA BROOKS</u></td> <td>Title: <u>Co-owner</u></td> </tr> </table>			Signature: <u>Brenda Brooks</u>	Date: <u>30 Aug 2015</u>	Name (type or print): <u>BRENDA BROOKS</u>	Title: <u>Co-owner</u>																															
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Issued 08/13/2015 by SLD

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM