

No. <b>W 7704</b>		<b>Due no later than Dec 31, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  KEN-SPRAY, L.L.C. KENNETH L. OWINGS 788 AIRPORT LOOP TWIN FALLS ID 83301 USA		KENNETH L. OWINGS 788 AIRPORT LOOP TWIN FALLS 83301			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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 KENNETH L. OWINGS	Street or PO Address 3087 E 3500 N		City TWIN FALLS	State ID	Country USA	Postal Code 83301
5. Organized Under the Laws of:  <b>ID</b> <b>W 7704</b>		6. Annual Report must be signed.*  Signature: Kenneth L. Owings Name (type or print): Kenneth L. Owings  Date: 10/14/2014 Title: Manager					
Processed 10/14/2014 * Electronically provided signatures are accepted as original signatures.							