No. W 142592	Due no later than Sep 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. TRACY WILLIAMS GORMAN, PLLC TRACY GORMAN 591 PARK AVE STE 202 IDAHO FALLS ID 83402		TRACY GORMAN 591 PARK AVE STE 202 IDAHO FALLS ID 83402 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.		or <u>rieir</u> regions.				
Office Held Name		treet or PO Address	City	State	Country	Postal Code
MANAGER TRACY W GORMAN		91 PARK AVE STE 202	IDAHO FALLS	ID	USA	83402-3573
5. Organized Under the Laws of: ID W 142592 6. Annual Report must be signed.* Signature: Tracy Gorman Name (type or print): Tracy Gorman		n	Date: 07/29/2015 Title: Manager			
Processed 07/29/2015	* Electronically provided signatures are accepted as original signatures.					