

No. <b>W 136877</b>		<b>Due no later than Apr 30, 2015</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>  IDAHO CITY HOTEL, LLC CINDA HERON PO BOX 530 IDAHO CITY ID 83631-0530		CINDA HERON 215 MONTGOMERY ST IDAHO CITY ID 83631			
<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 CINDA HERON	Street or PO Address 215 MONTGOMERY ST. PO BOX 530		City IDAHO CITY	State ID	Country USA	Postal Code 83631-0530
5. Organized Under the Laws of:  <b>ID</b> <b>W 136877</b>		6. Annual Report must be signed.*  Signature: Cinda Heron Name (type or print): Cinda Heron  Date: 04/20/2015 Title: Manager					
Processed 04/20/2015 * Electronically provided signatures are accepted as original signatures.							