

No. W 115926		Due no later than Jul 31, 2014 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		1. Mailing Address: Correct in this box if needed. NAMELESS, LLC KATIE J FRITZ 1499 FOXMORE POCATELLO ID 83204		KATIE JANE FRITZ 1499 FOXMORE POCATELLO ID 83204			
NO FILING FEE IF RECEIVED BY DUE DATE				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 KATIE J FRITZ	Street or PO Address 1499 FOXMORE		City POCATELLO	State ID	Country USA	Postal Code 83204
5. Organized Under the Laws of: ID W 115926		6. Annual Report must be signed.* Signature: Katie J Fritz Name (type or print): Katie J Fritz Date: 08/21/2014 Title: Manager					
Processed 08/21/2014 * Electronically provided signatures are accepted as original signatures.							