

No. W 84051	Due no later than May 31, 2016 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TOREUP LLC LEROY HARCOURT PO BOX 1181 TWIN FALLS ID 83303		LEROY HARCOURT 288 LOCUST STREET SOUTH TWIN FALLS ID 83301			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	KELSEY MCLIMANS	PO BOX 1181	TWIN FALLS	ID	USA	83303
MEMBER	LEROY HARCOURT	PO BOX 1181	TWIN FALLS	ID	USA	83303
5. Organized Under the Laws of: ID W 84051	6. Annual Report must be signed.* Signature: Leroy Harcourt Name (type or print): Leroy Harcourt		Date: 05/16/2016 Title: Member			
Processed 05/16/2016		* Electronically provided signatures are accepted as original signatures.				