No. W 38681	D	Due no later than Apr 30, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. ROBERTS DUPLEX #2, L.L.C. MARY ANN ROBERTS PO BOX 4577 HAILEY ID 83333		2. Registered Agent and Address (NO PO BOX) MARY ANN ROBERTS 336 CROY CREEK CANYON HAILEY 83333 3. New Registered Agent Signature:*				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ROBERTS DU MARY ANN PO BOX 4577							
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Er	nter Names and Address	ses of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
	ANN ROBERTS ARD G ROBERTS	PO BOX 4577 PO BOX 4577	HAILEY HAILEY	ID ID		83333 83333		
5. Organized Under the Laws of:	6. Annual Repo	6. Annual Report must be signed.*						
ID	Signature: M	Signature: Mary A Roberts			Date: 03/16/2015			
W 38681	Name (type	Name (type or print): Mary A Roberts		Title: member				
Processed 03/16/2015	* Electronically	* Electronically provided signatures are accepted as original signatures.						