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|--|---|---|---|-------|---------|-------------|
| No. <b>W 75704</b>   | <b>Due no later than Jun 30, 2014</b><br><b>Annual Report Form</b>  |   | 2. Registered Agent and Address <b>(NO PO BOX)</b>  |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>INVOICE SOLUTIONS LLC<br>JESSIE MARTINEZ<br>PO BOX 323<br>SHELLEY ID 83274 |   | JESSIE MARTINEZ<br>1004 N 900 E<br>SHELLEY ID 83274 |       |         |             |
|  |   |   | 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   | JESSIE MARTINEZ   | 397 E CENTER ST   | SHELLEY   | ID    | USA     | 83274       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 75704</b>   | 6. Annual Report must be signed.*<br>Signature: Jessie martinez<br>Name (type or print): Jessie martinez                                    |   | Date: 06/05/2014<br>Title: Owner                    |       |         |             |
| Processed 06/05/2014   |   | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |