No. W 2387	Annual Report Form Due No Later Than November 30. 193	2. Registered Agen	t and Office NOT A P.O. BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Address - Please Correct, If Not Correct		A BRUCE LARSON 241 S MAIN ST	
PO BOX 83720 BOISE, ID 83720-0080	PARABLE, ELC A BRUCE LARSON PO BOX 508	SODA SPR	RINGS ID 83276	
NO FEE REQUIRED		3. Organized Unde	3. Organized Under the Laws of:	
FIRST NOTICE * Corporations: Enter Names and Limited Liability Companies: Enter Names and Liability Companies: Enter Names an	d Addresses of President, Secretary and Directors ter Names and Addresses of ☐ Managers or ☐ Members or ☐ ☐ Members or ☐ ☐ Members or	pers (check one)	₩ 2387	
Office held Name MEMBLY A. B.	Street or P.O. Address	City -	State <u>Zip</u> ID 83274	
11 Richa	rd a parkhouse 91 Cedar Av.	i i	JD 83274	
		-	•	
5.				
SIGNATURE OF CURR	6. I certify that this Annual Report has been knowledge true, correct and complete. Signature			
ANY LAWFUL	Name (Typed or A. Bruer LA	RSON Title	member	
ISSUED: 37-08-1	996		239	