

No. W 129819	Due no later than Oct 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. EQUINE FLUID MOTION, LLC STEFANI SPENCER 35 NORTH BAKER ROAD SALMON ID 83467		STEFANI SPENCER 35 NORTH BAKER ROAD SALMON 83467			
			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	STEFANI SPENCER	35 N. BAKER RD.	SALMON	ID	USA	83467
5. Organized Under the Laws of: ID W 129819	6. Annual Report must be signed.* Signature: Stefani Spencer Name (type or print): Stefani Spencer		Date: 11/08/2014 Title: Owner			
Processed 11/08/2014		* Electronically provided signatures are accepted as original signatures.				