No. W 47063		Due no later than Feb 29, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		KIMBERLY D BROOKS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		NUE NORTH	NAMPA ID	23 9TH AVE N NAMPA ID 83687 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ente	r Names and Address	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER KIMBERI	Y D BROOKS	23 9TH AVENUE NORTH	NAMPA	ID		83687	
5. Organized Under the Laws of:	6. Annual Repo	6. Annual Report must be signed.*					
ID	Signature: k	Signature: Kimberly D Brooks		Date: 12/22/2015			
W 47063	Name (type	or print): Kimberly D Brooks		Title: Manager			
Processed 12/22/2015	* Electronically	* Electronically provided signatures are accepted as original signatures.					