

No. W 117292	Due no later than Sep 30, 2013 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) CHERYL MOSSBURGH 3153 W YUKON AVE POST FALLS ID 83854																																										
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. DELSEY, LLC 3153 W YUKON AVE POST FALLS ID 83854	3. <u>New</u> Registered Agent Signature.																																									
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																												
<table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>CHERYL MOSSBURGH</td> <td>3153 W. Yukon</td> <td>Post Falls</td> <td>Id</td> <td>USA</td> <td>83854</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>FLOYD MOSSBURGH</td> <td>3153 W. Yukon</td> <td>Post Falls</td> <td>Id.</td> <td>USA</td> <td>83854</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>RUSSELL MOSSBURGH</td> <td>E. 1619 Olympic</td> <td>Spokane</td> <td>WA</td> <td>USA</td> <td>99207</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>NORVAN J. MOSSBURGH</td> <td>818 Garden Ave</td> <td>Coeur d'Alene,</td> <td>Id.</td> <td>USA</td> <td>83814</td> </tr> <tr> <td></td> <td></td> <td>APT. #1</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	CHERYL MOSSBURGH	3153 W. Yukon	Post Falls	Id	USA	83854	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	FLOYD MOSSBURGH	3153 W. Yukon	Post Falls	Id.	USA	83854	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	RUSSELL MOSSBURGH	E. 1619 Olympic	Spokane	WA	USA	99207	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	NORVAN J. MOSSBURGH	818 Garden Ave	Coeur d'Alene,	Id.	USA	83814			APT. #1						
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5. Organized Under the Laws of: IDAHO W 117292	6. Signature: <u>Cheryl Mossburgh</u> Date: <u>09.17.2013</u> Name (type or print): <u>CHERYL MOSSBURGH</u> Title: <u>MANAGER</u>																																											
Issued 09/12/2013 by SLD 114211																																												

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.
- Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**
- Block 3:** Only a new registered agent must sign in Block 3.
- Block 4:** Check either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note: DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1.** If more space is needed please add an attachment.
- Block 5:** May not be altered through the use of this form.
- Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.
- ** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the limited liability company is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the limited liability company to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? 509.224.8114

POSTMARK DATES WILL NOT BE ACCEPTED

+ #4.

MEMBER ROD MOSSBURGH 818 Garden Ave CDA, Idaho
#1 Apartment USA
83814