

No. W 56776	Due no later than Dec 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. NELSON'S TRUTH VERIFICATION TESTING AND INVESTIGATIONS, LLC KIRK NELSON 763 W 25 S BLACKFOOT ID 83221	CORPORATION SERVICE COMPANY BOX 2877 BOISE 83701			
		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	KIRK NELSON	763 W. 25 S.	BLACKFOOT	ID	83221
5. Organized Under the Laws of: ID W 56776	6. Annual Report must be signed.* Signature: Kirk Nelson Date: 10/16/2014 Name (type or print): Kirk Nelson Title: owner/partner				
Processed 10/16/2014		* Electronically provided signatures are accepted as original signatures.			