No. <b>W 78112</b> I		ue no later than Oct 31, 2015 Annual Report Form	2	2. Registered Agent and Address (NO PO BOX)  DANIEL SIMMS 1 N. MAIN ABERDEEN ID 83210-0547  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DATABURST DANIEL L SI PO BOX 547 ABERDEEN II	ress: Correct in this box if needed.						
NO FILING FEE IF RECEIVED BY DUE DATE								
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	
MANAGER TAMARA MANAGER DANIEL L		366 N. 5TH W. 366 N. 5TH W.		ABERDEEN ABERDEEN	ID ID	USA USA	83210-0547 83210-0547	
5. Organized Under the Laws of: 6. Annual Repor		t must be signed.*						
ID	Signature: Da	Signature: Daniel L. Simms			Date: 10/10/2015			
W 78112	Name (type or print): Daniel L. Simms			Title: Manager				
Processed 10/10/2015	* Electronically p	* Electronically provided signatures are accepted as original signatures.						