

No. <b>W 117831</b>		<b>Due no later than Oct 31, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  BSH ENTERPRISES, LLC BONNIE SIMONE HAMILTON 2443 VICTORIAN CT TWIN FALLS ID 83301		BONNIE S HAMILTON 2443 VICTORIAN CT TWIN FALLS ID 83301			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name BONNIE SIMONE HAMILTON	Street or PO Address 2443 VICTORIAN CT		City TWIN FALLS	State IS	Country USA	Postal Code 83301
5. Organized Under the Laws of:  <b>ID</b> <b>W 117831</b>		6. Annual Report must be signed.*  Signature: Bonnie Hamilton Name (type or print): Bonnie Hamilton  Date: 08/27/2014 Title: Manager					
Processed 08/27/2014 * Electronically provided signatures are accepted as original signatures.							