No. W 47579	Due no later than Feb 28, 20:	
Return to:	Annual Report Form	De allacate de como esta de com
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box GAYLA THAYER FILLER CPA PLLC GAYLA FILLER 727 6TH AVE LEWISTON ID 83501	727 6TH AVE LEWISTON 83501 3. New Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or M	r Manager.
Office Held Name	Street or PO Address	ess City State Country Postal Code
MEMBER GAYLA THA	YER FILLER 928 BEACHVIEW BLVI	LVD CLARKSTON WA 99403
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: Gayla Filler	Date: 12/29/2014
W 47579	Name (type or print): Gayla Filler	Title: PLLC Member
Processed 12/29/2014 * Electronically provided signatures are accepted as original signatures.		