

No. <b>W 116596</b>		<b>Due no later than Aug 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>  SVLP, LLC PAM RHEINSCHILD PO BOX 3050 HAILEY ID 83333		PAM GOETZ 360 E AVENUE N STE 200 KETCHUM ID 83340			
<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 PAM RHEINSCHILD	Street or PO Address P. O. BOX 3050		City HAILEY	State ID	Country USA	Postal Code 83333
5. Organized Under the Laws of:  <b>ID</b> <b>W 116596</b>	6. Annual Report must be signed.*  Signature: Pam Rheinschild Name (type or print): Pam Rheinschild  Date: 06/07/2014 Title: Owner						
Processed 06/07/2014		* Electronically provided signatures are accepted as original signatures.					