

No. W 96823	Due no later than Oct 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. TIMBERLINE MOTORCYCLE TOURS LLC ROBERT WHEELock 3462 GALWAY CIRCLE POST FALLS ID 83854		ROBERT WHEELock 3462 GALWAY CIRCLE POST FALLS 83854			
			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
MANAGER	ROBERT WHEELock	765 ELMGROVE CT.	COEUR DALENE	ID	USA	83815
5. Organized Under the Laws of: ID W 96823	6. Annual Report must be signed.* Signature: ROBERT WHEELock Name (type or print): ROBERT WHEELock		Date: 10/06/2014 Title: MEMBER			
Processed 10/06/2014		* Electronically provided signatures are accepted as original signatures.				