No. W 133599		Due no later than Jan 31, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. RAINDOG'S HAVEN LLC ARTHUR L WOLD 515 S 7TH ST ST MARIES ID 83861		ARTHUR L WOLD 515 S 7TH ST ST MARIES 83861 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Addresses of a	t least one Member or Manager	r.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER CATHY J WOLD		OLD	515 S <i>7</i> TH ST		ST MARIES	ID	USA	83861
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Cathy Wold		Date: 01/07/2015				
W 133599		Name (type or print): Cathy Wold			Title: Manager			
Processed 01/07/2015 * Electronically provided signatures are accepted as original signatures.								