No. <b>W 50069</b>		Due no later than Apr 30, 2014	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.	A BRUCE LARSON 201 E. CENTER ST POCATELLO ID 83204  3. New Registered Agent Signature:*			
		AYERS-BLACKFOOT, LLC LANETT AYERS PO BOX 91				
		SODA SPRINGS ID 83276				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Compar	nies: Enter Na	mes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER LANETT AYE		ERS PO BOX 91	SODA SPRINGS	ID	USA	83276
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: A. Bruce Larson	Date: 03/27/2014			
W 50069		Name (type or print): A. Bruce Larson	Title: Agent/Attorney			
Processed 03/27/2014 * Electronically provided signatures are accepted as original signatures.						