

No. W 54491	Due no later than Sep 30, 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. 9353 NOMAD LLC THOMAS C HEISE PO BOX 1475 HAYDEN ID 83835	STEPHEN M AYERS 1424 SHERMAN #100 COEUR D'ALENE 83814			
		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	THOMAS C HEISE	HEISE FAMILY TRUST PO BOX 1475	HAYDEN	ID	83835
5. Organized Under the Laws of: ID W 54491	6. Annual Report must be signed.* Signature: TOM HEISE Name (type or print): TOM HEISE		Date: 11/02/2014 Title: MANAGER		
Processed 11/02/2014		* Electronically provided signatures are accepted as original signatures.			