

No. W 27615		Due no later than Dec 31, 2015 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		1. Mailing Address: Correct in this box if needed. HENRY INSURANCE AGENCY, LLC SCOTT P'POOL 904 12TH AVE SOUTH NAMPA ID 83651		CHRISTOPHER L JENSEN 904 12TH AVE S NAMPA ID 83651			
NO FILING FEE IF RECEIVED BY DUE DATE				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	
MEMBER	SCOTT D P'POOL	411 W BIRD AVE	NAMPA	ID	USA	83686	
MEMBER	CHRISTOPHER L JENSEN	12354 S ABBOTT DOWNING WAY	NAMPA	ID	USA	83686	
5. Organized Under the Laws of: ID W 27615		6. Annual Report must be signed.* Signature: Christopher L Jensen Name (type or print): Christopher L Jensen					
Processed 11/04/2015		Date: 11/04/2015 Title: Member * Electronically provided signatures are accepted as original signatures.					