No. W 35241		Due no later than Dec 31, 2014		2. Registered	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. SIMPSON LEASING, LLC JENNY J TROCK PO BOX 363 OROFINO ID 83544 USA mes and Addresses of at least one Member or Manager.			LONNIE E SIMPSON 217 COLLEGE AVE STE 5 OROFINO 83544			
				3. <u>New</u> Registe	3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	nes and Address	Street or PO Address	City	State	Country	Postal Code	
MEMBER	LONNIE E SIMPSON SHANNON D SIMPSON		8427 CAVENDISH HWY 8427 CAVENDISH HWY	LENORE LENORE	ID ID	Country	83541 83541	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Lonnie E. Simpson Date: 10/16/2014						
W 35241		Name (type o	r print): Lonnie E. Simpson	Tit	Title: Member (Partner)			
Processed 10/16/2014 * Electronically provided signatures are accepted as original signatures.								