

No. <b>W 110665</b>	<b>Due no later than Feb 28, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		PAM BURNS 1619 S. MILLER WAY NAMPA 83686			
	BURNS CUSTOM CABINETS LLC GABRIEL M BURNS 5021 N FARMFIELD RD NEWMAN LAKE WA 99025		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	GABRIEL MILLAR BURNS	5021 N. FARMFIELD RD.	NEWMAN LAKE	WA	USA	99025
5. Organized Under the Laws of:  <b>WA</b> <b>W 110665</b>		6. Annual Report must be signed.* Signature: Gabriel M Burns Name (type or print): Gabriel M Burns		Date: 12/19/2014 Title: Owner		
Processed 12/19/2014		* Electronically provided signatures are accepted as original signatures.				