

No. W 21390		Due no later than Nov 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		1. Mailing Address: Correct in this box if needed. CASCADE GROUP LLC ROSS LAWRENZ 1575 W DEADWOOD ST EAGLE ID 83616 USA		ROSS LAWRENZ 1575 W DEADWOOD ST EAGLE ID 83616		
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 MANAGER	Name ROSS LAWRENZ	Street or PO Address PO BOX 1287	City BOISE	State ID	Country	Postal Code 83616
5. Organized Under the Laws of: ID W 21390		6. Annual Report must be signed.* Signature: Ross Lawrenz Name (type or print): Ross Lawrenz Date: 09/28/2014 Title: Manager				
Processed 09/28/2014 * Electronically provided signatures are accepted as original signatures.						