

No. W 140752		Due no later than Aug 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. PROPERTY PARAMEDICS LLC 1103 W O'FARREL ST APT C BOISE ID 83702		MICHAEL DESAULNIERS 1103 W O'FARREL ST APT C BOISE ID 83702-8370			
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	MICHAEL DESAULNIERS	1103 W OFARRELL ST APT C	BOISE	ID	USA	83702	
MEMBER	JAIME HASTINGS	1103 W OFARRELL ST.	BOISE	ID	USA	83702	
5. Organized Under the Laws of: ID W 140752		6. Annual Report must be signed.* Signature: Michael Desaulniers Name (type or print): Michael Desaulniers					
		Date: 07/14/2015 Title: Owner					
Processed 07/14/2015		* Electronically provided signatures are accepted as original signatures.					