

No. <b>W 94767</b>		<b>Due no later than Jul 31, 2013</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>1. Mailing Address: Correct in this box if needed.</b>  TWISTED SUBS, LLC BOBBI J LEONHARDT PO BOX 310 MONTPELIER ID 83254 USA		BOBBI J LEONHARDT 1190 ETHEL ST MONTPELIER ID 83254			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	BOBBI J LEONHARDT	850 ETHEL STREET	MONTPELIER	ID	USA	83254	
MEMBER	MICHAEL I LEONHARDT	1215 ETHEL STREET	MONTPELIER	ID	USA	83254	
5. Organized Under the Laws of:  <b>ID</b> <b>W 94767</b>		6. Annual Report must be signed.*  Signature: Bobbi J. Leonhardt Name (type or print): Bobbi J. Leonhardt					
		Date: 08/12/2013 Title: Co-Owner					
Processed 08/12/2013		* Electronically provided signatures are accepted as original signatures.					