

No. <b>W 93627</b>		<b>Due no later than May 31, 2016</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>  BLU HELR LLC JACOB M PROW 7251 AQUILA RD LEWISTON ID 83501		JACOB PROW 7251 AQUILA RD LEWISTON ID 83501			
<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	
MANAGER	JACOB PROW	7251 AQUILA RD	LEWISTON	ID	USA	83501	
MEMBER	VAUGHAN P PROW	2614 ECHO HILLS DR	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:  <b>ID</b> <b>W 93627</b>		6. Annual Report must be signed.*  Signature: Jacob Prow Name (type or print): Jacob Prow					
		Date: 06/05/2016 Title: Owner					
Processed 06/05/2016      * Electronically provided signatures are accepted as original signatures.							