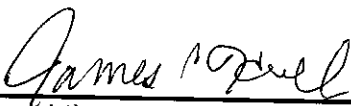
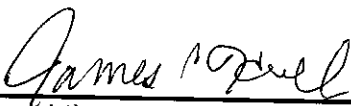
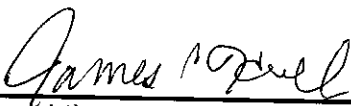


No. <b>W 59981</b>	<b>Due no later than Mar 31, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JAMES C HULL 6887 E CUB RIVER RD PRESTON ID 83263																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> HULL SPRAY SERVICE, LLC 6887 E CUB RIVER RD PRESTON ID 83263		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>James C Hull</td> <td>6887 E Cub River Road</td> <td>Preston</td> <td>Ida</td> <td>USA</td> <td>83263</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	James C Hull	6887 E Cub River Road	Preston	Ida	USA	83263	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold;">IDAHO W 59981</div>		6. <table style="width: 100%;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: <u>1/30/13</u> </td> </tr> <tr> <td>           Name (type or print): <u>James C Hull</u> </td> <td>           Title: <u>owner/manager</u> </td> </tr> </table>		Signature: 	Date: <u>1/30/13</u>	Name (type or print): <u>James C Hull</u>	Title: <u>owner/manager</u>																															
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Issued 01/28/2013 by JL1 <span style="float: right;">124597</span>																																						

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM