No. <b>W 131791</b>		Due no later than Dec 31, 2014		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		COLBY TRIPP				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  PROGRESSIVE TITLE LOANS, LLC  COLBY TRIPP  703 WASHINGTON STREET N		703 WASHINGTON STREET N TWIN FALLS 83301-8330				
								TWIN FALLS ID 83301
		NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Compa	nies: Enter Na	mes and Addres	ses of at least one Member or Manage	r.				
Office Held	îce Held Name		Street or PO Address		City	State	Country	Postal Code
MEMBER TRACY J FRAMEMBER COLBY T TR			703 WASHINGTON ST. NOR <sup>-</sup> 703 WASHINGTON ST. NOR <sup>-</sup>		TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301
		T						
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 131791		Signature: colby tripp			Date: 01/14/2015			
		Name (type or print): colby tripp			Title: member			
Processed 01/14/2015		* Electronically	provided signatures are accepted as or	riginal sign	atures.			