

No. W 92882		Due no later than Apr 30, 2013 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. SHIPP ENTERPRISES, LLC MIKE SHIPP 6085 N EAGLE RD BOISE ID 83713		MICHAEL SHIPP DMD 6085 N EAGLE RD BOISE ID 83713			
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 MANAGER	Name MICHAEL SHIPP	Street or PO Address 239 E TRAILSIDE DR		City EAGLE	State ID	Country USA	Postal Code 83616
5. Organized Under the Laws of: ID W 92882		6. Annual Report must be signed.* Signature: Michael Shipp Name (type or print): Michael Shipp Date: 02/13/2013 Title: President					
Processed 02/13/2013 * Electronically provided signatures are accepted as original signatures.							