

|   |                 |   |       |  |         |             |  |
|---|-----------------|---|-------|--|---------|-------------|--|
| No. <b>W 138251</b>   |                 | <b>Due no later than May 31, 2015</b><br><b>Annual Report Form</b>  |       | 2. Registered Agent and Address ( <b>NO PO BOX</b> )         |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080  |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>S & J MANAGEMENT, LLC<br>JULIETTE BLASER<br>4387 E ALDERSTONE ST<br>NAMPA ID 83686 |       | SAMUEL S PREISLER<br>1557 SOUTHSIDE BLVD S<br>MELBA ID 83641 |         |             |  |
| <b>NO FILING FEE IF<br/>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   | JULIETTE BLASER | 4387 E ALDERSTONE ST  | NAMPA | ID   | USA     | 83686       |  |
| MEMBER  | SHERMAN BLASER  | 4387 E ALDERSTONE ST  | NAMPA | ID   | USA     | 83686       |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 138251</b>                                 |                 | 6. Annual Report must be signed.*<br><br>Signature: Samuel Preisler<br>Name (type or print): Samuel Preisler  |       |  |         |             |  |
|   |                 | Date: 06/19/2015<br>Title: Registered Agent   |       |  |         |             |  |
| Processed 06/19/2015      * Electronically provided signatures are accepted as original signatures. |                 |   |       |  |         |             |  |