

No. W 9351	Due no later than Jul 31, 2015 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. PROTEX, LLC ROBERT B AHTEN 7790 W MOSSY CUP BOISE ID 83709 USA		JONATHAN AHTEN 7790 W MOSSY CUP #C BOISE ID 83709-8304			
			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
MEMBER	ROBERT B AHTEN	7790 W. MOSSY CUP, SUITE C	BOISE	ID	USA	83709
MEMBER	SARA M AHTEN	11211 HICKORY DALE DRIVE	BOISE	ID	USA	83713
5. Organized Under the Laws of: ID W 9351		6. Annual Report must be signed.* Signature: Jonathan B Ahten Name (type or print): Jonathan B Ahten Date: 05/26/2015 Title: Legal & Account Manager				
Processed 05/26/2015		* Electronically provided signatures are accepted as original signatures.				