No. **W 121909**	**Due no later than Feb 28, 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.** BARE UR ARMS LLC GEOFF OR LORRI ROTH 1034 COUNTRY RD 70 WEISER ID 83672 USA	GEOFFREY A ROTH 1034 COUNTRY RD 70 WEISER 83672 3. New 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	LORRI LEANN ROTH	1034 COUNTY ROAD 70	WEISER	ID	USA	83672

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 121909**	Signature: Lorri Roth	Date: 03/02/2015
	Name (type or print): Lorri Roth	Title: member

Processed 03/02/2015

* Electronically provided signatures are accepted as original signatures.