No. <b>W 106905</b>		Due no later than Sep 30, 2016 Annual Report Form  1. Mailing Address: Correct in this box if needed.  TRURX LLC SCOTT ADCOCK 500 E SHORE DR SUITE 120 EAGLE ID 83616		2	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					SCOTT ADCOCK 500 E SHORE DR #120 EAGLE ID 83616  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
MANAGER SCOTT ADC		COCK	500 E SHORE DR #120		EAGLE	ID	USA	83616
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Scott Adcock			Date: 07/26/2016			
W 106905		Name (type or print): Scott Adcock			Title: Manager			
Processed 07/26/2016 * Electronically provided signatures are accepted as original signatures.								