

No. W 12562		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		1. Mailing Address: Correct in this box if needed. SILVER LIGHT AND SHADOWS, L.L.C. CRAE BERRETT 2891 SHELLY PLACE POCATELLO ID 83201		CRAE T BERRETT 2891 SHELLY PLACE POCATELLO ID 83201			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	CRAE T BERRETT	2891 SHELLY PLACE	POCATELLO	ID	USA	83201	
MANAGER	LAURIE BERRETT	2891 SHELLY PLACE	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of: ID W 12562		6. Annual Report must be signed.* Signature: Crae Berrett Name (type or print): Crae Berrett					
		Date: 05/19/2015 Title: Manager					
Processed 05/19/2015 * Electronically provided signatures are accepted as original signatures.							