

No. W 23289		Due no later than Mar 31, 2014		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		Annual Report Form		CADE JACOBS 5411 S 1000 W VICTOR ID 83455			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		SCENIC SCAPES, LLC CADE JACOBS PO BOX 1063 VICTOR ID 83455					
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	CADE JACOBS	5411 S 1000W	VICTOR	ID	USA	83455	
MEMBER	KRISTY JACOBS	5411 S 1000 W	VICTOR	ID	USA	83455	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 23289		Signature: Cade Jacobs			Date: 02/03/2014		
		Name (type or print): Cade Jacobs			Title: Owner		
Processed 02/03/2014		* Electronically provided signatures are accepted as original signatures.					