

No. <b>W 20720</b>		<b>Due no later than Sep 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  STORMER, LLC CHARLES A. STORY 518 PUEBLO BOISE ID 83702		CHARLES A STORY 518 PUEBLO BOISE ID 83702			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	CHARLES A STORY	518 PUEBLO	BOISE	ID	83703		
MEMBER	PATRICK ALLEN PALMER	593 CHARLIE HORSE LANE	EAGLE	ID	83616		
5. Organized Under the Laws of:  <b>ID</b> <b>W 20720</b>		6. Annual Report must be signed.*  Signature: Charles A. Story Name (type or print): Charles A. Story					
		Date: 07/18/2015 Title: Member					
Processed 07/18/2015		* Electronically provided signatures are accepted as original signatures.					