


No. W 128875	Due no later than Sep 30, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MEL DONENFELD 421 MONARCH ROAD SAGLE ID 83860
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. DONENFELD & SONS, LLC MEL DONENFELD PO BOX 1692 SANDPOINT ID 83864		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member	Name	Street or PO Address	City State Country Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Mel Donenfeld	PO BOX 1692 Sandpoint ID	Benner Co 83864
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Eric Donenfeld	408 Lincoln Ave Sandpoint ID	Benner Co 83864
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Cory Donenfeld	318 Huggert St	" "
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> IDAHO W 128875 </div>		6. Signature: <div style="text-align: center;">  _____ Name (type or print): </div> <div style="text-align: right; margin-top: 10px;"> Date: 10/28/14 _____ Title: Owner </div>	
Issued 10/20/2014 by CLH		117634	

INSTRUCTIONS FOR FILING ANNUAL REPORT FORM