

No. W 6803	Due no later than Aug 31, 2014 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MACE, L.L.C. DIRK MACE 430 NORTH 1800 EAST ST ANTHONY ID 83445		DIRK MACE 430 NORTH 1800 EAST ST ANTHONY ID 83445			
			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	ROBERT MACE	699 N 2000 E	ST ANTHONY	ID	USA	83445
MANAGER	DIRK E MACE	430 N 1800 E	ST. ANTHONY	ID	USA	83445
5. Organized Under the Laws of: ID W 6803	6. Annual Report must be signed.* Signature: Dirk Mace Name (type or print): Dirk Mace		Date: 07/01/2014 Title: Manager			
Processed 07/01/2014		* Electronically provided signatures are accepted as original signatures.				