

| | | | | | | | |
|--|--------------------|---|----------|---|---------|------------------|--|
| No. W 58961 | | Due no later than Feb 28, 2015 | | 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 1. Mailing Address: Correct in this box if needed. KELLY LLC JOHN P KELLY PO BOX 150 MURTAUGH ID 83344 USA | | WILLIAM R HOLLIFIELD 249 3RD AVE E TWIN FALLS 83301 | | | |
| | | | | 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 | JOHN PATRICK KELLY | 4525 E 3425 N | MURTAUGH | ID | USA | 83344 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 58961 | | Signature: John Kelly | | | | Date: 12/15/2014 | |
| | | Name (type or print): John Kelly | | | | Title: Member | |
| Processed 12/15/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |