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|--|---------------|--|-------|---|---------|------------------|-----------------|
| No. J 2347 | | 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 | | JONATHON WREN 623 S UNIVERSITY BLVD #2148 NAMPA 83686 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| WREN DESIGNED LLP JONATHON WREN 623 S UNIVERSITY BLVD #2148 NAMPA ID 83686 | | | | | | | |
| 4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| PARTNER | JONATHON WREN | 623 S UNIVERSITY BLVD #2148 | NAMPA | ID | | 83686 | |
| PARTNER | CARL WREN | 623 S UNIVERSITY BLVD #2148 | NAMPA | ID | | 83686 | |
| 5. Organized Under the Laws of: ID J 2347 | | 6. Annual Report must be signed.* Signature: Jonathon I Wren Name (type or print): Jonathon I Wren | | | | | |
| | | | | | | Date: 12/31/2014 | Title: Co-Owner |
| Processed 12/31/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |