

No. W 28917		Due no later than Mar 31, 2014 Annual Report Form		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> EARL H SMITH 9589 E MAUGHAN RD LAVA HOT SPRINGS ID 83246	
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ALMOST HEAVEN, LLC 9589 E MAUGHAN RD LAVA HOT SPRINGS ID 83246-1526		3. New Registered Agent Signature.	
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>					
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 checked="" type="checkbox"/> Member <input type="checkbox"/>		Earl H Smith	9589 E. Maughan Rd Lava Hot Springs, ID	9589 E. Maughan Rd Lava Hot Springs, ID	83246
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>		William Smith	6125 Cherry Hill Dr. Beaverton, Or	6125 Cherry Hill Dr. Beaverton, Or	97008
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>		Marilyn Smith	9589 E. Maughan Rd Lava Hot Springs, ID	9589 E. Maughan Rd Lava Hot Springs, ID	83246
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>		Wendy Smith	6125 Cherry Hill Dr. Beaverton, Or	6125 Cherry Hill Dr. Beaverton, Or	97008
5. Organized Under the Laws of:		6.			
IDAHO W 28917		Signature: <u>Earl H. Smith</u> Name (type or print): <u>EARL H. SMITH</u>			
				Date: <u>2/11/14</u>	Title: <u>Manager</u>
Issued 01/29/2014 by SLD					
124791					

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM