No. 0114129	Annual Report Form Due No Later Than November		Agent and Office NOT	
Return to: SECRETARY OF STATE	1. Mailing Address - Please Correct, if Not C	Correct 11460	KARCHER R	D
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	WELLS CONSTRUCTION, I DUANE J WELLS 11460 KARCHER RD	INC. NAMPA	I D	83651
NO FEE REQUIRED		3. Organized	l Under the Laws of:	
** FINAL NOTICE **	NAMPA ID d	33651 IT	C11	4120
Limited Liability Companies: En	d Addresses of President, Secretary and Di ter Names and Addresses of Managers or	r i Members (check one)	Sant.	75-
Office held Name	Street or P.O. Address		<u>State</u>	<u>Zip</u>
President Di	cane J. Wells P.O. Bo	m 938 No	impa Id	83653
Section C	imberly R.Wells 1139 heryl S.Wells P.O.	Box 938 N	ampa Id	83.653
5. NATURE OF BUSINE	S 6. I certify that this Annual R	Report has been examined by	y me and is to the b	est of my
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