

No. W 42637	Due no later than Sep 30, 2013 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. APPLEVINE LLC KAY KELSEY PO BOX 291 CAREY ID 83320		KAY KELSEY 292 LITTLE WOOD RIVER RESERVOIR RD CAREY ID 83320			
			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	KAY KELSEY	PO BOX 291	CAREY	ID	USA	83320
5. Organized Under the Laws of: ID W 42637	6. Annual Report must be signed.* Signature: Kay Kelsey Name (type or print): Kay Kelsey		Date: 07/24/2013 Title: Member			
Processed 07/24/2013		* Electronically provided signatures are accepted as original signatures.				