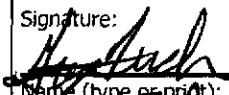


No. W 21305	Due no later than Nov 30, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ENTITY SERVICES INC 216 W JEFFERSON BOISE ID 83702
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. BOISE'S BETTER BENEFITS, LLC PO BOX 190791 BOISE ID 83719		3. <u>New</u> Registered Agent Signature.
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"/> <i>Monza 350 PO Box Boise ID 83719</i>			
Manager <input type="checkbox"/> Member <input type="checkbox"/> <i>managerial 190791</i>			
Manager <input type="checkbox"/> Member <input type="checkbox"/> <i>public</i>			
Manager <input type="checkbox"/> Member <input type="checkbox"/> <i>Property</i>			
Manager <input type="checkbox"/> Member <input type="checkbox"/> <i>trust</i>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 21305 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature:  Name (type or print): <i>Greg Ketch</i> </div> <div style="width: 35%;"> Date: <i>10/17/11</i> Title: <i>Trustee</i> </div> </div>	
Issued 09/19/2014 by JL1		130070	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM