

No. W 36159	Due no later than Jan 31, 2014 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. AUTO-PAY, LLC JAMES WOOD 1176 N 1340 E SHELLEY ID 83274		JAMES WOOD 1176 N 1340 E SHELLEY ID 83274			
			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	LUCILE ANN HOWARD	PO BOX 50352	IDAHO FALLS	ID	USA	83405
5. Organized Under the Laws of: ID W 36159	6. Annual Report must be signed.* Signature: James Port Wood Name (type or print): James Port Wood		Date: 01/02/2014 Title: Ceo			
Processed 01/02/2014		* Electronically provided signatures are accepted as original signatures.				