

No. W 106429	Due no later than Sep 30, 2018 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	1. Mailing Address: Correct in this box if needed. NORTHWEST BLINDS, LLC JOSHUA DESJARLAIS 923 W. FALLVIEW DR. COEUR D'ALENE ID 83815 USA		JOSHUA DESJARLAIS 923 W. FALLVIEW DR. COEUR D'ALENE ID 83815				
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name JOSHUA A DESJARLAIS	Street or PO Address 923 W. FALLVIEW DR.	City COEUR D'ALENE	State ID	Country USA	Postal Code 83815	
5. Organized Under the Laws of: ID W 106429	6. Annual Report must be signed.* Signature: Josh DesJarlais Name (type or print): Josh DesJarlais						Date: 08/19/2018 Title: Member
Processed 08/19/2018	* Electronically provided signatures are accepted as original signatures.						