No. W 71611 Return to:		Due no later than Feb 28, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX) SHAUN WILLIAMS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. S C WILLIAMS LLC SHAUN WILLIAMS 107 E 1 N REXBURG ID 83440		107 E 1 N REXBURG ID 83440 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	oanies: Enter Nai	mes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	ER SHAUN WILLIAMS		107 E 1 N		REXBURG	ID		83440
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Shaun Williams			Date: 04/12/2018			
W 71611		Name (type or print): Shaun Williams			Title: Owner			
Processed 04/12/2018 * Electronically provided signatures are accepted as original signatures.								