No. C 206206		Due no later than Jun 30, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. W E HOKANSON FAMILY ORGANIZATION COMPANY LAUNA D MCINTYRE 4519 S COTTAGE GROVE LANE NAMPA ID 83686		2. Registered A	2. Registered Agent and Address (NO PO BOX) LAUNA D MCINTYRE 4519 S COTTAGE GROVE LN NAMPA ID 83686			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				NAMPA ID				
				3. New Registered Agent Signature:*				
4. Corporations: Enter N Office Held	Names and Busin Name	ess Addresses of Pre	esident, Secretary, and Directors. Treasu Street or PO Address	rer (optional). City	State	Country	Postal Code	
PRESIDENT VICE PRESIDENT SECRETARY	VIONE W GRAHAM DEVON ETSEL HOKANSON LAUNA D MCINTYRE		PO BOX 623 3005 W 820 N 4519 S COTTAGE GROVE LN	LACENTER PROVO NAMPA	WA UT ID	USA	98629 83442 83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 206206		Signature: Launa		Date: 07/24/2017				
		Name (type or print): Launa D McIntyre			Title: Secretary			
Processed 07/24/2017		* Electronically prov	ided signatures are accepted as original	signatures.				