No. W 50982		Due no later than May 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: Ani		nual Report Form ss: Correct in this box if needed.		JAKE TRAUGHBER 368 S 200 E JEROME ID 83338 3. New Registered Agent Signature:*			
4. Limited Liability Companies: Enter N	 ames and Addresses o	f at least one Member or Manager.					
Office Held Name		Street or PO Address		City	State	Country	Postal Code
MEMBER JAKE TRA MEMBER JENNIFER	JGHBER TRAUGHBER	368 S 200 E 368 S 200 E		JEROME JEROME	ID ID	USA USA	83338 83338
5. Organized Under the Laws of: 6. Annual Report n		ust be signed.*					
ID	Signature: Jake T	Signature: Jake Traughber Date: 03/20/2016					
W 50982	Name (type or print): Jake Traughber			Title: member			
Processed 03/20/2016	* Electronically provided signatures are accepted as original signatures.						