No. W 77112		Due no later than Aug 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. SWEDE SERVICES LLC ADAM ANDERSEN 1027 N ROBINS AVE IDAHO FALLS ID 83401		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				1027 N ROBIN IDAHO FALLS	ADAM ANDERSEN 1027 N ROBINS AVE IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
		mes and Addresse	s of at least one Member or Manager.					
	Name		Street or PO Address	City	State	Country	Postal Code	
THE STATE OF THE S	ADAM W AI SUMMER M		1027 N ROBINS AVE 1027 N ROBINS AVE	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83401 83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 77112		Signature: AD		Date: 09/02/2016				
		Name (type or		Title: MANAGER				
Processed 09/02/2016		* Electronically pr	ovided signatures are accepted as origina	l signatures.				