

No. W 25395	Due no later than Aug 31, 2016 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		KENNETH A MILLER 1074 HERNDON RD OROFINO ID 83544			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	KENNETH MILLER	1074 HERNDON RD	OROFINO	ID		83544
MANAGER	LAURELLA F MILLER	3471 GRANGEMONT RD	OROFINO	ID		83544
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID W 25395	Signature: Laurella Miller			Date: 08/17/2016		
			Name (type or print): Laurella Miller			Title: Owner
Processed 08/17/2016		* Electronically provided signatures are accepted as original signatures.				