No. W 102251 Return to:		Due no later than Apr 30, 2015 Annual Report Form	2. Registered Agent and Address (NO PO BOX) GLEN BAIRD II 729 16TH ST LEWISTON ID 83501 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. NEWAY MANAGEMENT LLC GLEN BAIRD 729 16TH ST LEWISTON ID 83501				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Com	npanies: Enter Nar	nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER GLEN BAIRD		II 729 16TH STREET	LEWISTON	ID	USA	83501
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Glen baird	Date: 05/18/2015			
W 102251		Name (type or print): Glen baird	Title: Manager			
Processed 05/18/2015 * Electronically provided signatures are accepted as original signatures.						