




No. <b>W 128250</b>	Due no later than Aug 31, 2017 <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> L C FRAZEE 307 SETTLERS LN MOYIE SPRINGS ID 83845																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> SMEAC, LLC L C FRAZEE PO BOX 428 MOYIE SPRINGS ID 83845		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 20%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>L.C. Frazee</td> <td>P.O. Box 428</td> <td>Moyie Springs</td> <td>Idaho</td> <td>US</td> <td>83845</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	L.C. Frazee	P.O. Box 428	Moyie Springs	Idaho	US	83845	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold;">             IDAHO              W 128250           </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: <u>7/1/2017</u> </td> </tr> <tr> <td>           Name (type or print):  <u>L.C. Frazee</u> </td> <td>           Title:  <u>Manager</u> </td> </tr> </table>		Signature: 	Date: <u>7/1/2017</u>	Name (type or print): <u>L.C. Frazee</u>	Title: <u>Manager</u>																															
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Issued 07/11/2017 by JLI		125369																																				