

No. W 118823	Due no later than Nov 30, 2017 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	1. Mailing Address: Correct in this box if needed. POMEROY SCHOW, LLC 208 SUNNYHILL CIRCLE TWIN FALLS ID 83301		KAREN KASTER 208 SUNNYHILL CIRCLE TWIN FALLS ID 83301				
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name KAREN KASTER	Street or PO Address 208 SUNNYHILL CIR	City TWIN FALLS	State ID	Country USA	Postal Code 83301	
5. Organized Under the Laws of: ID W 118823	6. Annual Report must be signed.* Signature: Karen Kaster Name (type or print): Karen Kaster						Date: 10/05/2017 Title: Manager
Processed 10/05/2017	* Electronically provided signatures are accepted as original signatures.						