No. <b>W 151289</b>		Due no later than May 31, 2016		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CHRIS S HA	CHRIS S HAYES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		WESTERN SKI		IDAHO FALLS	890 OXFORD DR IDAHO FALLS ID 83401  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	TIMOTHY T	OPLIFF	890 OXFORD DR	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Timothy Topliff			Date: 04/27/2016			
W 151289		Name (type or		Title: Manager				
Processed 04/27/2016 * Electronically provided signatures are accepted as original signatures.								