No. C 133069		Due no later than Mar 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. BETTE JO BERRYMAN, LPA, CHARTERED BETTE JO BERRYMAN 819 W PENNWOOD STREET MERIDIAN ID 83642		2. Registered A	2. Registered Agent and Address (NO PO BOX) BETTE JO BERRYMAN 819 W PENNWOOD STREET MERIDIAN ID 83642 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				O10 M/ DEMIN				
				MERIDIAN II				
4. Corporations: Enter Names	and Busin	ess Addresses of P	resident, Secretary, and Directors. Treas	urer (optional).				
Office Held Na	me		Street or PO Address	City	State	Country	Postal Code	
	BETTE JO BERRYMAN		819 W. PENNWOOD ST.	MERIDIAN	ID	USA	83642	
SECRETARY TE	RRY M B	AYLESS, SR	819 W PENNWOOD ST.	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Bett		Date: 01/24/2017				
C 133069		Name (type or		Title: President				
Processed 01/24/2017		* Electronically pro	ovided signatures are accepted as origina	l signatures.				