No. <b>W 127094</b>		Due no later than Jul 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:	n to: Annual Report Form		Market Company Company and Com	LACEY OLSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	1. Mailing Address: Correct in this box if needed.  PANHANDLE SUPPORT SERVICES LLC CHRISTOPHER R OLSON PO BOX 2337 SANDPOINT ID 83684			513 N 4TH AVE SANDPOINT ID 83684  3. New Registered Agent Signature:*			
BOISE, ID 83720-0080			3. <u>New</u> Register				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	lames and Addresse	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER CHRISTOP	ER R OLSON	513 N. 4TH AVE	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID	Signature: Christopher R Olson		Da	Date: 07/29/2017			
W 127094	Name (type or print): Christopher R Olson		Ti	Title: Owner, Manager			
Processed 07/29/2017	* Electronically pr	* Electronically provided signatures are accepted as original signatures.					