No. W 100050		Due no later than Jan 31, 2016		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF		Annual Report Form 1. Mailing Address: Correct in this box if needed. ASAOA LLC SHANNON MORLOCK 3527 6TH ST LEWISTON ID 83501		SHANNON MORLOCK 3527 6TH ST LEWISTON ID 83501				
					3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE								
4. Limited Liability Companies:	Enter Nan	nes and Addresse	s of at least one Member or Manager.					
Office Held Na	me		Street or PO Address		City	State	Country	Postal Code
MEMBER SH	IANNON M	ORLOCK	3527 6TH ST		LEWISTON	ID	USA	83501
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Shannon Morlock			Date: 02/06/2016			
W 100050		Name (type or print): Shannon Morlock			Title: Member			
Processed 02/06/2016	* Electronically provided signatures are accepted as original signatures.							