

No. W 95772	Due no later than Aug 31, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		JAMES CONNELLY 13389 W BELLFLOWER DR BOISE ID 83713			
	CYCLEOLOGIST, LLC (THE) JAMES CONNELLY 13389 W BELLFLOWER DR BOISE ID 83713		3. <u>New</u> Registered Agent Signature: *			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	JAMES W CONNELLY	13389 W. BELLFLOWER DR.	BOISE	ID	USA	83713-1345
5. Organized Under the Laws of: ID W 95772		6. Annual Report must be signed.* Signature: James Connelly Name (type or print): James Connelly		Date: 10/03/2017 Title: Manager		
Processed 10/03/2017		* Electronically provided signatures are accepted as original signatures.				