

No. W 109209	Due no later than Dec 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. 6 SCHICKS, LLC THERESE SCHICK P.O. BOX 2508 EAGLE ID 83616		THERESE SCHICK 5906 HALF MOON LANE EAGLE ID 83616			
			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	THERESE SCHICK	P.O. BOX 2508	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID W 109209	6. Annual Report must be signed.* Signature: Therese Schick Name (type or print): Therese Schick		Date: 12/01/2017 Title: Manager			
Processed 12/01/2017		* Electronically provided signatures are accepted as original signatures.				