

No. W 40984		Due no later than Jul 31, 2018 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		1. Mailing Address: Correct in this box if needed. 669 RIVER ROAD RANCH, LLC JAMES W MECHAM PO BOX 3119 TWIN FALLS ID 83303		JAMES W MECHAM 412 MAIN AVE N TWIN FALLS ID 83301		
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MANAGER	Name JAMES W MECHAM	Street or PO Address 412 MAIN AVE N	City TWIN FALLS	State ID	Country	Postal Code 83301
5. Organized Under the Laws of: ID W 40984		6. Annual Report must be signed.* Signature: James W Mecham Name (type or print): James W Mecham Date: 06/06/2018 Title: Manager				
Processed 06/06/2018 * Electronically provided signatures are accepted as original signatures.						