No. W 123831	D	Due no later than Apr 30, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form		JOHN F MAGI	JOHN F MAGNUSON, ATTORNEY AT LAW				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MOUNT MICA TIMOTHY R 4547 W PRES	1. Mailing Address: Correct in this box if needed. MOUNT MICA MEADOWS, LLC TIMOTHY R PASK 4547 W PRESLEY RD COEUR D'ALENE ID 83814		1250 NORTHWOOD CTR CT #A COEUR D ALENE ID 83814 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	COEOR D'ALE	ENC 1D 63614	J. <u>New</u> Registere	u Agent 3	ignature.			
4. Limited Liability Companies: Enter	Names and Address	ses of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
MANAGER TIMOTHY	R. PASK	4547 W PRESLEY RD	COEUR D'ALENE	ID	USA	83814		
5. Organized Under the Laws of:	6. Annual Repo	ort must be signed.*						
ID	Signature: T	Signature: Timothy R Pask			Date: 03/11/2017			
W 123831	Name (type	Name (type or print): Timothy R Pask		Title: Manager				
Processed 03/11/2017	* Electronically	* Electronically provided signatures are accepted as original signatures.						