


No. W 17248	Due no later than Dec 31, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) RANDY HOFFER 3679 E SHADY GLEN BOISE ID 83706																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TRINITY PARKS, L.L.C. RANDY HOFFER PO BOX 911 BOISE ID 83701		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>RANDY HOFFER</td> <td>P.O. BOX 91</td> <td>BOISE</td> <td>ID</td> <td>USA</td> <td>83701</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>MISTY LARA</td> <td>1827 N. RAYMOND</td> <td>BOISE</td> <td>ID</td> <td>USA</td> <td>83704</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	RANDY HOFFER	P.O. BOX 91	BOISE	ID	USA	83701	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	MISTY LARA	1827 N. RAYMOND	BOISE	ID	USA	83704	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 17248 </div>	6. Signature:  <hr/> Name (type or print): RANDY HOFFER			Date: <u>9-1-2017</u> Title: <u>MANAGER</u>																																		
Issued 02/23/2017 by SAT			111850																																			