No. W 64767		Due no later than Jul 31, 2017		2. Registered Agent and Address (NO PO BOX) CLINTEN HEWARD 15 E MAIN ST DECLO ID 83323 3. New Registered Agent Signature:*			
eturn to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 PO BOX 93		HEWARD	15 E MAIN S DECLO ID				
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
200 200 200 200 200 200 200 200 200 200	er Names and Addres	sses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	n Heward Heward	PO BOX 93 19 WEST 400 SOUTH	DECLO BURLEY	ID ID	USA USA	83323 83318	
5. Organized Under the Laws of: 6. Annua		Annual Report must be signed.*					
ID	Signature:	Signature: Clinten Heward Date: 08/15/2017					
W 64767	Name (type	or print): Clinten Heward		Title: Manager			
Processed 08/15/2017	* Electronically	* Electronically provided signatures are accepted as original signatures.					