No. W 132665 Return to:			Due no later than Jan 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX) THOMAS DAY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		CONTIC THOMA 207 N 6		PARI	207 N 6TH ST PARMA ID 83660 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	panies: Enter l	Names and Ad	ddresses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	Stat	e Country	Postal Code	
MANAGER	THOMAS	DAY	PO BOX 431	PARM	A ID	USA	83660	
5. Organized Under the Laws of:		6. Annual	Report must be signed.*					
ID		Signatu	ure: Thomas L Day		Date: 12/04/2015			
W 132665		Name ((type or print): Thomas L Day		Title: Manager			
Processed 12/04/2015 * Electronically provided signatures are accepted as original signatures.								