No. W 36840		Due no later than Feb 28, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ALBERT MATSUURA, PLLC ALBERT MATSUURA 611 WILSON STE 2 POCATELLO ID 83201		611 WILSON	ALBERT MATSUURA 611 WILSON STE 2 POCATELLO ID 83201 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		TOGATELLO I	03201		J			
4. Limited Liability Compa	anies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	ALBERT MA	TSUURA	611 WILSON STE 2	POCATELLO	ID		83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Albert Matsuura			Date: 12/29/2016			
W 36840		Name (type or		Title: Manager				
Processed 12/29/2016 * Electronically provided signatures are accepted as original signatures.								