

No. <b>W 125561</b>		Due no later than May 31, 2017 <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  L.I.T.T. LLC JEFFERY A DE MENT 6637 KELSO LAKE RD ATHOL ID 83801		JEFFERY DEMENT 6637 KELSO LAKE RD ATHOL ID 83801			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	CHERYL ANN DE MENT	6637 KELSO LAKE RD	ATHOL	ID	USA	83801	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 125561</b>		Signature: Cheryl A. De Ment				Date: 04/15/2017	
		Name (type or print): Cheryl A. De Ment				Title: Manager	
Processed 04/15/2017		* Electronically provided signatures are accepted as original signatures.					