No. <b>W 43065</b>		Due no later than Sep 30, 2017		2. Registered	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.  CAROLYN CASEY LLC CAROLYN MURPHY CASEY 9259 W BEACHSIDE LANE BOISE ID 83714		9259 W BE BOISE ID	CAROLYN MURPHY CASEY 9259 W BEACHSIDE LANE BOISE ID 83714  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		mes and Addresses of at least one Member or Manager.		<u></u>				
Office Held	ompanies: Enter Nai Name	mes and Addresses (	Street or PO Address	City	State	Country	Postal Code	
MANAGER CAROLYN MURPHY CASEY MANAGER CLINTON O CASEY			9259 W BEACHSIDE LANE 9259 W BEACHSIDE LANE	BOISE BOISE	ID ID	Courid y	83714 83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Carolyn		J	Date: 08/31/2017			
W 43065		Name (type or print): Carolyn			Title: Manager			
Processed 08/31/20	17	* Electronically prov	rided signatures are accepted as origina	l signatures.				