No. W 61616	Due no later than Apr 30, 2017	2. Registered Agent and Address (NO PO BOX)
Return to:	Annual Report Form	TODD R STAM
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.	1831 N LAKEWOOD DR
	HAYDEN LAKEVIEW, LLC TODD STAM 1831 N LAKEWOOD DR	SUITE A COEUR D'ALENE ID 83814
	SUITE A	3. New Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE	COEUR D ALENE ID 83814	
4. Limited Liability Companies: Enter N	ames and Addresses of at least one Member or Manager.	
Office Held Name	Street or PO Address	City State Country Postal Code
MANAGER TODD R S	TAM 1831 N LAKEWOOD DR SUITE A	COEUR D ALENE ID 83814
MANAGER ZETTA M	STAM 1831 N LAKEWOOD DR SUITE A	COEUR D ALENE ID 83814
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: Todd Stam	Date: 02/23/2017
W 61616	Name (type or print): Todd Stam	Title: Manager
Processed 02/23/2017	* Electronically provided signatures are accepted as original si	gnatures.