

No. <b>W 125885</b>		<b>Due no later than Jun 30, 2018</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> LONGLEAF WILDERNESS MEDICINE, LLC JASON LUTHY PO BOX 1616 SANDPOINT ID 83864		JASON LUTHY 327 OLIVE UNIT K SANDPOINT ID 83864			
				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	
MEMBER	JASON CARL LUTHY	327 OLIVE ST UNIT K	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:  <b>ID W 125885</b>		6. Annual Report must be signed.* Signature: Jason Luthy Name (type or print): Jason Luthy					
		Date: 04/26/2018 Title: Owner					
Processed 04/26/2018		* Electronically provided signatures are accepted as original signatures.					