No. W 54834		Due no later than Sep 30, 2015		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 Iddress: Correct in this box if needed. WESTMENTS, LLC BINS H RD	27022 GOT PARMA ID	CHELLE ROBINS 27022 GOTSCH RD PARMA ID 83660 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
	er Names and Addre	sses of at least one Member or Manager.		_			
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MICHELLE ROBINS		27022 GOTSCH RD	PARMA	ID		83660	
MEMBER DEBBIE	GEBERT	24148 GOODSON RD	PARMA	ID		83660	
MEMBER JEFFER	Y ROBINS	27022 GOTSCH RD	PARMA	ID	USA	83660	
5. Organized Under the Laws of: 6. Annual Repor		ort must be signed.*					
l 1D	Signature:	Signature: Chelle Robins		Date: 10/20/2015			
W 54834	Name (type	Name (type or print): Chelle Robins		Title: Member			
Processed 10/20/2015	* Electronically	provided signatures are accepted as original	signatures.				