No. W 31388 Return to:		Due no later than Jun 30, 2016 Annual Report Form		2	2. Registered Agent and Address (NO PO BOX) EARL T COFFMAN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. E. THOMAS, L.L.C. EARL T COFFMAN 851 S 5TH AVE POCATELLO ID 83201			851 S 5TH AVE POCATELLO ID 83201 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nar	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	ANAGER EARL T COFFMAN		851 S 5TH AVE		POCATELLO	ID		83201
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Earl Coffman			Date: 06/08/2016			
W 31388		Name (type or print): Earl Coffman			Title: owner/manager			
Processed 06/08/2016 * Electronically provided signatures are accepted as original signatures.								