No. <b>W 89794</b>		Due no later than Jan 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SAMUEL L COUCH			
SECRETARY OF STATE	1. Mailing A	1. Mailing Address: Correct in this box if needed.		1070 GREENCREEK RD GREENCREEK ID 83533-5001			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	RISING ROAD TOURS LLC SAMUEL L COUCH 1070 GREENCREEK RD		GREENCREEK	GREENCREEN ID 653535-3001			
	GREENCREEK	GREENCREEK ID 83533-5001		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	lames and Address	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER SAMUEL L COUCH		1070 GREENCREEK RD	GREENCREEK	ID	USA	83533-5001	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID	Signature: Samuel L Couchj			Date: 11/19/2016			
W 89794	Name (type o		Title: Manager				
Processed 11/19/2016	* Electronically p	* Electronically provided signatures are accepted as original signatures.					