No. W 48007	The state of the s	Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DCCK PROPI CONNIE ST 1042 WILDV		CONNIE STORRER 1042 WILDWOOD WAY TWIN FALLS ID 83301 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	Norman and Address	mes and Addresses of at least one Member or Manager.					
Office Held Name	er Names and Addres	Street or PO Address	City	State	Country	Postal Code	
MANAGER CONNI	STORRER W CRAGUN	1042 WILDWOOD WAY 1042 WILDWOOD WAY	TWIN FALLS TWIN FALLS	ID ID	Country	83301 83301	
5. Organized Under the Laws of: 6. Annual		ort must be signed.*					
ID	Signature:	Signature: connie storrer Date: 03/03/201			/03/2018		
W 48007	Name (type	or print): connie storrer		Title: manager			
Processed 03/03/2018	* Electronically	* Electronically provided signatures are accepted as original signatures.					