No. W 50909		Due no later than May 31, 2016	2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	JON SOWERS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. J & J PROPERTY MANAGEMENT, LLC JON D SOWERS 6100 SW SHADY CT MOUNTAIN HOME ID 83647	6100 SW SHADY CT MOUNTAIN HOME ID 83647-8364 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Cor	mpanies: Enter Nar	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER JON SOWER		S 6100 SW SHADY CT	MOUNTAIN HON	IE ID		83647	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 50909		Signature: Jon Sowers	Date: 04/08/2016				
		Name (type or print): Jon Sowers	itle: Owner & General Manager				
Processed 04/08/2016 * Electronically provided signatures are accepted as original signatures.							