No. <b>W 129234</b>	Due no later than Sep 30, 2018	2. Registered Agent and Address (NO PO BOX)
Return to:	Annual Report Form	SHAWN LEARY
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	6059 N MADELLAINE DR COEUR D ALENE ID 83815
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	RIVER CITY RUNNING REBELS LLC SHAUN LEARY PO BOX 1804	COEUR D'ALENE ID 63815
	COEUR D ALENE ID 83816	3. <u>New</u> Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.		
Office Held Name	Street or PO Address	City State Country Postal Code
MEMBER SHAUN I	EARY 6059 N MADELLAINE DR	COEUR D ALENE ID USA 83815
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: Shaun Leary	Date: 07/30/2018
W 129234	Name (type or print): Shaun Leary	Title: Agent
Processed 07/30/2018	* Electronically provided signatures are accepted as original signatures.	