

No. W 111925		Due no later than Mar 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ULEDA LIMITED LIABILITY COMPANY RANDY THORESON DAVID RESESKA 521 N FOURTH ST SANDPOINT ID 83864		DAVID RESESKA 521 N FOURTH ST SANDPOINT ID 83864			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name RANDY B THORESON	Street or PO Address 521 NTH 4TH AVE		City SANDPOINT	State ID	Country USA	Postal Code 83864
5. Organized Under the Laws of: ID W 111925		6. Annual Report must be signed.* Signature: DAVID RESESKA Name (type or print): DAVID RESESKA Date: 03/02/2016 Title: PARTNER					
Processed 03/02/2016 * Electronically provided signatures are accepted as original signatures.							