

No. W 189272		Due no later than Sep 30, 2018 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. WILL & SUE, LLC STACY L RIFE 284 WILLIAMS CREEK RD SALMON ID 83467 USA		STACY L RIFE 284 WILLIAMS CREEK RD SALMON ID 83467			
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 STACY L RIFE	Street or PO Address 284 WILLIAMS CREEK RD		City SALMON	State ID	Country USA	Postal Code 83467
5. Organized Under the Laws of: ID W 189272		6. Annual Report must be signed.* Signature: Stacy L Rife Name (type or print): Stacy L Rife Date: 07/31/2018 Title: Managing Member					
Processed 07/31/2018 * Electronically provided signatures are accepted as original signatures.							