No. W 17574	CONTRACTOR OF THE CONTRACTOR O	Due no later than Dec 31, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	I. Mailing Address IRONWOOD OFFICE ED MORSE 2101 LAKEWOOD D	Annual Report Form 1. Mailing Address: Correct in this box if needed. IRONWOOD OFFICE PARK LLC ED MORSE 2101 LAKEWOOD DR STE 225 COEUR D ALENE ID 83814		ED MORSE 2101 LAKEWOOD DR STE 225 COEUR D'ALENE ID 83814 3. New 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		
MANAGER ED MOF MANAGER STEPHE	SE MEYER	2101 LAKEWOOD DR STE 225 700 IRONWOOD DR STE 300	COEUR D'ALENE COEUR D'ALENE	ID ID		83814 83814		
5. Organized Under the Laws of:	6. Annual Report mus	6. Annual Report must be signed.*						
ID	Signature: Ed Mors	Signature: Ed Morse			Date: 11/14/2015			
W 17574	Name (type or prin	Name (type or print): Ed Morse		Title: Manager				
Processed 11/14/2015	* Electronically provide	* Electronically provided signatures are accepted as original signatures.						