No. **W 65032**	**Due no later than Jul 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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** POKERWIDOW LLC 1096 NORTH EASTLAND DRIVE SUITE 200 TWIN FALLS ID 83301	WILLIAM L DUKE 2631 N 3300 W ARCO ID 83213 3. New Registered Agent Signature:*

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	WILLIAM L DUKE	2631 N 3300 W	ARCO	ID		83213
MEMBER	LEOLA A DUKE	2631 N 3300 W	ARCO	ID		83213

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 65032**	Signature: Bethany Griggs	Date: 06/03/2016
	Name (type or print): Bethany Griggs	Title: Bookkeeper

Processed 06/03/2016

* Electronically provided signatures are accepted as original signatures.