

No. W 36027		Due no later than Jan 31, 2017		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. AUTOMATED CONTROL SOLUTIONS, LLC. TIMOTHY W HEALD 2467 W WILLOW POINTE AVE NAMPA ID 83651		TIMOTHY W HEALD 2467 W WILLOW POINT AVE NAMPA ID 83651	
				3. <u>New</u> 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
MANAGER	TIMOTHY W HEALD	2467 W WILLOW POINT AVE	NAMPA	ID	83651
MEMBER	JANET M HEALD	2467 W WILLOW POINT AVE	NAMPA	ID	83651
5. Organized Under the Laws of: ID W 36027		6. Annual Report must be signed.* Signature: Timothy W Heald Name (type or print): Timothy W Heald Date: 11/25/2016 Title: Manager			
Processed 11/25/2016		* Electronically provided signatures are accepted as original signatures.			