

No. W 73839	Due no later than Apr 30, 2018 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JEFFREY K SMITH 2960 E MIGRATORY DR BOISE ID 83706	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. JEFFREY K. SMITH, PLLC JEFFREY K SMITH 2960 E MIGRATORY DR BOISE ID 83706		3. New Registered Agent Signature.	
NO FILING FEE IF RECEIVED BY DUE DATE				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Name	Street or PO Address	City	State Country Postal Code
Manager <input type="checkbox"/> Member <input type="checkbox"/>	Jeffrey K Smith 300 W. Main St, Boise Id 83702 Suite 117			
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
5. Organized Under the Laws of: IDAHO W 73839		6. Signature: <u>Jeff Smith</u> Name (type or print): <u>Jeff Smith</u> Date: <u>4/27/18</u> Title: <u>sole practitioner</u>		

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM