No. W 14247		Due no later than Jan 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. BOB MCKEE CONSTRUCTION, LLC CHRISTA MCKEE 625 WEST MCKEE ROAD INKOM ID 83245		2. Registered	2. Registered Agent and Address (NO PO BOX) SAMUEL A MCKEE 625 WEST MCKEE ROAD INKOM ID 83245 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				625 WEST				
				3. <u>New</u> Regist				
200		mes and Addres	ses of at least one Member or Manager.	C'h	Chaha	C	De etel Ce de	
Office Held MEMBER MEMBER	Name ROBERT S MCKEE SAMUEL A MCKEE		Street or PO Address 641 W MCKEE RD 641 W MCKEE RD	City INKOM INKOM	State ID ID	Country	Postal Code 83245 83245	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Christa McKee Date: 11/21/2015						
W 14247		Name (type	or print): Christa McKee		Title: secretary			
Processed 11/21/2015 * Electronically provided signatures are accepted as original signatures.								