| No. W 124453 Return to: | | Due no later than Apr 30, 2018 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) GINNELL HELLHAKE 223 ALTA VISTA MCCALL ID 83638 3. New Registered Agent Signature:* | | | |
|--|------------------|--|-----------|---|---------|-------------|--|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. JAVA MAMMAS, LLC GINNELL L HELLHAKE PO BOX 149 MCCALL ID 83638 | MCCALL II | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | |
| 4. Limited Liability Compa | anies: Enter Nar | mes and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | NICKI DYSOI | N PO BOX 1866 | MCCALL | ID | USA | 83638 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Ginnell Hellhake | Date | Date: 03/01/2018 | | | |
| W 124453 | | Name (type or print): Ginnell Hellhake | Title | Title: managing member | | | |
| Processed 03/01/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | |