No. W 169391 Return to:		Due no later than Jul 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. WOWZERBOX, L.L.C. ROWDY BAKER 2554 ALDERWOOD AVE TWIN FALLS ID 83301		2. Registered Agent and Address (NO PO BOX) ROWDY BAKER 2554 ALDERWOOD AVE TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	WOWZERBOX, L. ROWDY BAKER 2554 ALDERWOO						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ente	er Names and Addresses of	of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER JORDAI	I MARIE MEDINA	2554	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: 6. Annual Re		ust be signed.*					
ID	Signature: Rowd	Signature: Rowdy Baker		Date: 08/16/2017			
W 169391	Name (type or p	Name (type or print): Rowdy Baker		Title: Registered Agent			
Processed 08/16/2017	* Electronically prov	* Electronically provided signatures are accepted as original signatures.					