No. W 25456 Return to:		Due no later than Aug 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. STONERIDGE, LLC MICHAEL MATZEK PO BOX 140477 BOISE ID 83714		3	Registered Agent and Address (NO PO BOX) MICHAEL G MATZEK			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				5149 N. W/ BOISE ID	5149 N. WATERSEDGE AVE. BOISE ID 83714 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter N	ames and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	MICHAEL (G MATZEK	P.O. BOX 140477	BOISE	ID		83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: N	Michael G. Matzek		Date: 08/15/2017			
W 25456		Name (type	or print): Michael G. Matzek		Title: Member			
Processed 08/15/2017	* Electronically provided signatures are accepted as original signatures.							