No. W 56776	Due no later than Dec 31, 2017	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	BOISE ID 83701			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	1. Mailing Address: Correct in this box if needed. NELSON'S TRUTH VERIFICATION TESTING AND INVESTIGATIONS, LLC				
BOISE, ID 83720-0080	KIRK NELSON 763 W 25 S BLACKFOOT ID 83221	3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*		
RECEIVED BY DUE DATE	BEACH COT ID 03221				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MEMBER KIRK NE	SON 763 W. 25 S.	BLACKFOOT	ID		83221
5. Organized Under the Laws of: 6. Annual Report must be signed.*					
ID	Signature: Kirk Nelson	Date: 10/30/2017			
W 56776	Name (type or print): Kirk Nelson	Title: owner/partner			
Processed 10/30/2017	* Electronically provided signatures are accepted as original signatures.				