No. <b>W 100491</b>		Due no later than Feb 28, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		PAUL LANDERS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  LANDERS INSURANCE LLC.  PAUL C LANDERS  1424 SHERMAN AVE  #400  COEUR D ALENE ID 83814		1424 SHERMAN AVE #400 COEUR D ALENE ID 83814  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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 PAUL C LANDERS		1424 SHERMAN AVE #400	COEUR D ALENE	ID	USA	83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Paul Landers		Date: 12/27/2017			
W 100491		Name (type or print): Paul Landers		Title: Owner			
Processed 12/27/2017 * Electronically provided signatures are accepted as original signatures.							