

No. W 30622		Due no later than May 31, 2018		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. MDE, LLC TIMOTHY R EICHNER 1090 EICHNER RD KENDRICK ID 83537-9500		MARILYN J EICHNER 1050 EICHNER RD KENDRICK ID 83537-9500	
				3. <u>New</u> Registered Agent Signature:*	
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
MANAGER	TIMOTHY R EICHNER	1090 EICHNER RD	KENDRICK	ID	83537-9509
5. Organized Under the Laws of: ID W 30622		6. Annual Report must be signed.* Signature: TIM R Eichner Name (type or print): TIM R Eichner Date: 03/19/2018 Title: Manager			
Processed 03/19/2018		* Electronically provided signatures are accepted as original signatures.			