

No. W 153443	Due no later than Jun 30, 2018 Annual Report Form			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. ZIONS MANAGEMENT LLC ZIONS 919 SOUTH 25TH EAST AMMON ID 83406			TYLER SCHWENDIMAN 919 S 25TH E AMMON ID 83406-8340			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name TYLER CREDIT	Street or PO Address 919 SOUTH 25TH EAST		City AMMON	State ID	Country USA	Postal Code 83406
5. Organized Under the Laws of: ID W 153443	6. Annual Report must be signed.* Signature: tyler schwendiman Name (type or print): tyler schwendiman						Date: 04/23/2018 Title: Manager
Processed 04/23/2018	* Electronically provided signatures are accepted as original signatures.						