No. <b>W 117139</b> Return to:		Due no later than Sep 30, 2018 Annual Report Form	2. Registered Agent and Address (NO PO BOX)  DEREK JONES 7531 S 1800 W  REXBURG ID 83340  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  STRAW MAZE LLC (THE)  JARED ORR 7531 S 1800 W  REXBURG ID 83340				
NO FILING FEE IF RECEIVED BY DUE DATE		Address of the second				
Office Held		mes and Addresses of at least one Member or Manager.	Cib	Ctata	Country	Doctal Code
	Name JARED ORR	Street or PO Address 7531 S 1800 W	City REXBURG	State ID	Country	Postal Code 83440
MEMBER	JAKED OKK	7551 S 1600 W	REXBURG	ID	USA	63440
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ъ		Signature: Jared Orr	Date: 07/31/2018			
W 117139		Name (type or print): Jared Orr	Title: Member			
Processed 07/31/2018 * Electronically provided signatures are accepted as original signatures.						