No. W 14978 Return to:		Due no later than Apr 30, 2015 Annual Report Form		į	2. Registered Agent and Address (NO PO BOX) JAMES R LASKI			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CCL, LLC ELIZABETH CARD PO BOX 885 DRIGGS ID 83422			675 SUN VALLEY RD STE A KETCHUM 83340 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	ELIZABETH CARD		PO BOX 885		DRIGGS	ID		83422
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 14978		Signature: Elizabeth Card			Date: 03/30/2015			
		Name (type or print): Elizabeth Card			Title: Manager			
Processed 03/30/2015 * Electronically provided signatures are accepted as original signatures.								