No. <b>W 123946</b>		Due no later than Apr 30, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  MCCRINK CONSULTING LLC  KEVIN MCCRINK  660 E SAND WEDGE DR		SARAH CHRISTENSEN 20738 S WATSON RD COEUR D'ALENE ID 83814  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresse	s of at least one Member or Manager					
200 01 0	ame	ries and Addresse	Street or PO Address		City	State	Country	Postal Code
MEMBER KEVIN MCCF		RINK	660 E. SAND WEDGE DR.		POST FALLS	ID	USA	83854
5. Organized Under the Laws of:  ID  W 123946		6. Annual Report must be signed.* Signature: Kevin McCrink Name (type or print): Kevin McCrink			Date: 04/25/2017 Title: Member			
Processed 04/25/2017 * Electronically provided signatures are accepted as original signatures.								