No. W 142718		Due no later than Sep 30, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. 226 S HEMLOCK CT, LLC AARON J ARMSTRONG PO BOX 1530 POST FALLS ID 83877-1530		2. Registered Ag	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				201 S HEMLO	AARON J ARMSTRONG 201 S HEMLOCK CT POST FALLS ID 83854 3. New Registered Agent Signature:*			
				3. <u>New</u> Register				
4. Limited Liability Compai Office Held	nies: Enter Nai Name	mes and Addresses	of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code	
MANAGER AARON J ARMST		RMSTRONG	201 S HEMLOCK CT	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Aar		Date: 07/24/2017				
W 142718		Name (type or		Title: Manager				
Processed 07/24/2017 * Electronically provided signatures are accepted as original signatures.								