No. <b>W 81807</b>		Due no later than Feb 29, 2016  Annual Report Form		2	2. Registered Agent and Address (NO PO BOX)  ADAM NELSON			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  BAAD, LLC 335 S MAIN ST MERIDIAN ID 83642 USA			ADAM NELSON 335 S MAIN ST MERIDIAN ID 83642  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	anies: 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 ADAM L NELSON		LSON	335 S. MAIN ST.		MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: adam nelson			Date: 12/22/2015			
W 81807		Name (type or print): adam nelson			Title: Managing partner			
Processed 12/22/2015 * Electronically provided signatures are accepted as original signatures.								