| No. W 80171 Return to: | | Due no later than Dec 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. BARNESY BOYS, LLC KODY T BARNES 3609 E. 3960 N. KIMBERLY ID 83341 | | | 2. Registered Agent and Address (NO PO BOX) DON BARNES 2969 RUBY DR TWIN FALLS ID 83301 3. New Registered Agent Signature:* | | | |
|---|---|--|------------------------------------|------------|---|---------|-------------|--|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | TWIN FALLS | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compa | anies: Enter N | ames and Addresses | of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | KODY T B | ARNES | 3609 E. 3960 N. | KIMBERLY | ID | USA | 83341 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Kody T. Barnes | | | Date: 11/17/2017 | | | |
| W 80171 | | Name (type or | | Title: Mr. | | | | |
| Processed 11/17/2017 | rocessed 11/17/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | |