No. W 144972	Due no later than Dec 31, 2015	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	KATIE LYNN PIERCE			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	3789 MCCREA DR ISLAND PARK ID 83429-8342			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ALL SEASONS ALL PROPERTY MANAGEMENT, LLC KATIE LYNN PIERCE PO BOX 523	3. New Registered Agent Signature:*			
	ISLAND PARK ID 83429				
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Companies: 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 KATIE LYNN	I PIERCE PO BOX 523	ISLAND PARK	ID	USA	83429
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Katie Lynn Pierce	Date: 01/27/2016			
W 144972	Name (type or print): Katie Lynn Pierce	Title: Owner			
Processed 01/27/2016	* Electronically provided signatures are accepted as original signatures.				