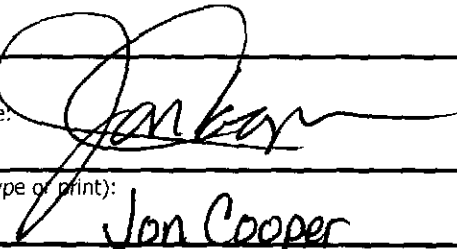
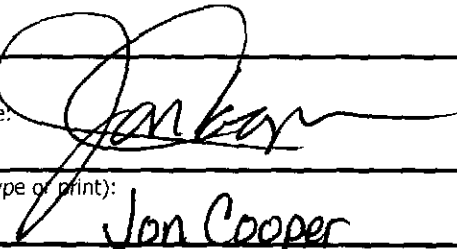
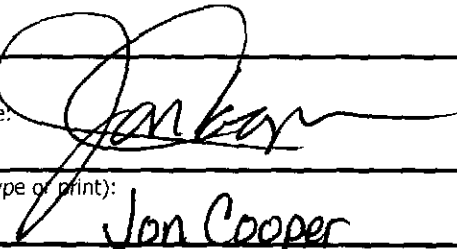


No. <b>W 155331</b>	Due no later than Aug 31, 2016 <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JON COOPER 10 BEARTOWN HORSESHOE BEND ID 83629
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> COOPER DEVELOPMENT & MFG. LLC JON COOPER 10 BEARTOWN HORSESHOE BEND ID 83629		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.
 

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Jon Cooper	10 BEAR TOWN	(HORSESHOE BEND IDAHO)			83629
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of:  <div style="text-align: center;">             IDAHO              W 155331           </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: <u>July 6, 2016</u> </td> </tr> <tr> <td>           Name (type or print): <u>Jon Cooper</u> </td> <td>           Title: <u>Owner</u> </td> </tr> </table>	Signature: 	Date: <u>July 6, 2016</u>	Name (type or print): <u>Jon Cooper</u>	Title: <u>Owner</u>
Signature: 	Date: <u>July 6, 2016</u>				
Name (type or print): <u>Jon Cooper</u>	Title: <u>Owner</u>				

Issued 06/28/2016 by CLH
124791

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the**