

No. W 40986	Due no later than Jul 31, 2018 Annual Report Form		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	1. Mailing Address: Correct in this box if needed.		JAMES W MECHAM 412 MAIN AVE N TWIN FALLS ID 83301			
	412 ROAN HOUSE, LLC JAMES W MECHAM PO BOX 3119 TWIN FALLS ID 83303-3119		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	JAMES W MECHAM	412 MAIN AVE N	TWIN FALLS	ID		83301
5. Organized Under the Laws of: ID W 40986		6. Annual Report must be signed.* Signature: James W Mecham Name (type or print): James W Mecham		Date: 06/06/2018 Title: Manager		
Processed 06/06/2018		* Electronically provided signatures are accepted as original signatures.				