No. W 106237		Due no later than Aug 31, 2018		2. F	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			BOONE SMITH				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BOONE SMITH WILDLIFE CAPTURE, LLC BOONE S SMITH 248 S 200 E PRESTON ID 83263		F	248 S 200 E PRESTON ID 83263 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Comp	oanies: Enter Nai	mes and Addresses of at	least one Member or Manager.						
Office Held	Name		Street or PO Address	Ci	ty	State	Country	Postal Code	
MANAGER BOONE S SI		MITH	248 S 200 E	PR	RESTON	ID	USA	83263	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: boone smith			Date: 09/23/2018				
W 106237		Name (type or print): boone smith			Title: owner				
Processed 09/23/2018 * Electronically provided signatures are accepted as original signatures.									