No. <b>W 82877</b>		Due no later than Apr 30, 2017		2	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			NATALIE CARGILL HOWARD 319 19TH ST LEWISTON ID 83501				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		d.					
		CARGILL-HOWARD-TUTCHER LLC NATALIE J CARGILL PO BOX 934 LEWISTON ID 83501							
				3	3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compar	ies: Enter Nar	mes and Addresses	of at least one Member or Manager.						
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
MEMBER	CHRISTINA M CARGILL		302 11TH AVE		LEWISTON	ID	USA	83501	
MEMBER	PAUL D TUT	TCHER	1411 PROSPECT AVE		LEWISTON	ID	USA	83501	
MEMBER	BER NATALIE J		1522 HEMLOCK AVE		LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID W 82877		Signature: NATALIE CARGILL			Date: 02/24/2017				
		Name (type or print): NATALIE CARGILL			Title: MEMBER				
Processed 02/24/2017	* Electronically provided signatures are accepted as original signatures.								