

No. W 104825		Due no later than Jul 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. DR WENDELL R FACKRELL PLLC WENDELL R FACKRELL 1405 N MERIDIAN RD MERIDIAN Id 83642 USA		WENDELL FACKRELL 1405 N MERIDIAN RD MERIDIAN ID 83642	
				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
MEMBER	SARAH WOOSKY	160 ALTURAS DR.	MOUNTAIN HOME	ID	USA 83647
5. Organized Under the Laws of: ID W 104825		6. Annual Report must be signed.* Signature: Wendell Fackrell Name (type or print): Wendell Fackrell Date: 05/23/2016 Title: Optometrist			
Processed 05/23/2016		* Electronically provided signatures are accepted as original signatures.			