

No. W 163206		Due no later than Mar 31, 2017 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		1. Mailing Address: Correct in this box if needed. VERMANTI L.C 315 CLEVELAND ST AMERICAN FALLS ID 83211		GABRIEL RIVAS 315 CLEVELAND ST AMERICAN FALLS ID 83211			
NO FILING FEE IF RECEIVED BY DUE DATE				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	GABRIEL RIVAS	315 CLEVELAND ST	AMERICAN FALLS	ID	USA	83211	
5. Organized Under the Laws of: ID W 163206		6. Annual Report must be signed.* Signature: Gabriel Rivas Name (type or print): Gabriel Rivas Date: 01/26/2017 Title: Member					
Processed 01/26/2017 * Electronically provided signatures are accepted as original signatures.							