No. W 107067	Annual Report Form 1. Mailing Address: Correct in this box if needed.	2. Registered Agent and Office (NOT A P.O. BOX) R. D. WATSON 408 E SHERMAN AVE STE 202 COEUR D ALENE ID 83814
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		
NO FILING FEE IF RECEIVED BY DUE DATE	,	3. <u>New</u> Registered Agent Signature.
4. Limited Liability Manager or Member	Companies: Enter Names and Addresses of Managers Name Street or PO Address City	s OR Members. See Instructions. State Country Postal Code
Manager X Member 7	Tomoth A Rucko POBOX 1591 cdf	Id. Koot 83816
Manager Member 🗆 🏗	moty A. Bucho P.O Box 1591 cdi	a Id KaoT 83816
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Manager Member 🗆 🕇	moty A Bucho P. OBOX 1591 C	dr Id Koot 83816
5. Organized Under the Lar IDAHO	Signature: Lomothy A. Bue	Date: Sept 22, 2014
W 107067	Name (type or print):	ritle: president