No. <b>W 81086</b>		Due no later than Feb 29, 2016		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			GARY W LONGFELLOW			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  LONGFELLOW ENTERPRISES, LLC GARY W LONGFELLOW 3519 7TH ST LEWISTON ID 83501		LEWISTON I	3519 7TH ST LEWISTON ID 83501  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nar	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	GARY W LO	NGFELLOW	3519 <i>7</i> TH ST	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ron Carpenter			Date: 12/22/2015			
W 81086		Name (type or print): Ron Carpenter			Title: bar manager			
Processed 12/22/2015 * Electronically provided signatures are accepted as original signatures.								