No. W 25930		Due no later than Sep 30, 2015	Registered Agent and Address (NO PO BOX) DIANE KRITZ 4030 RIVER RESORT DR HOMEDALE ID 83628				
Return to:		Annual Report Form					
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.					
		SNAKE RIVER R.V. RESORT, LLC. DIANE B KRITZ 415 VOLPI YSABEL RD		NOTICE ID 03020			
		PASO ROBLES CA 93446	3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF		USA					
RECEIVED BY DUE DATE							
4. Limited Liability Co	ompanies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER DIANE KRITI		Z 4030 RIVER RESORT DR	HOMEDALE	ID		83628	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
Ю		Signature: Diane Kritz	Date: 08/01/2015				
W 25930		Name (type or print): Diane Kritz	Title: Manager				
Processed 08/01/2015 * Electronically provided signatures are accepted as original signatures.							