No. <b>W 33724</b>		Due no later than Oct 31, 2016	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720		Annual Report Form  1. Mailing Address: Correct in this box if needed.  BUCK BROTHERS, LLC JOHN W SANDERS		JOHN W SANDERS 1407 MAIN STREET LEWISTON ID 83501			
NO FILING FEE IF RECEIVED BY DUE DATE		1407 MAIN ST LEWISTON ID 83501		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Com Office Held	ipanies: Enter Nar Name	nes and Addresses of at least one Member or Manager. Street or PO Address	•	City	State	Country	Postal Code
MANAGER	JOHN SANDE			LEWISTON	ID	USA	83501
5. Organized Under the Laws of:  ID  W 33724		6. Annual Report must be signed.* Signature: JOHN SANDERS Name (type or print): JOHN SANDERS		Date: 08/30/2016 Title: MANAGER			
Processed 08/30/2016 * Electronically provided signatures are accepted as original signatures.							