No. W 160595		Due no later than Jan 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. TIMOTHY WESTON, LLC 5976 W CONKLING RD WORLEY ID 83876		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				5976 W CON WORLEY ID	TIMOTHY WESTON 5976 W CONKLING RD WORLEY ID 83876 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: 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	ANAGER TIMOTHY WESTOR		5976 W CONKLING RD	WORLEY	ID	USA	83876	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Timothy Weston		Date:	Date: 01/03/2017			
W 160595		Name (type or print): Timothy Weston		Title:	Title: Managing Member			
Processed 01/03/2017 * Electronically provided signatures are accepted as original signatures.								