No. W 47061		Due no later than Feb 28, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to:	Ar	Annual Report Form		CHRIS JACKSON				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Addr C & C MANAGEME CHRIS JACKSON 1120 30TH ST LEWISTON ID 8	,	LEWISTON II	1120 30TH ST LEWISTON ID 83501 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: E	nter Names and Addresses o	f at least one Member or Manager.						
Office Held Name	9	Street or PO Address	City	State	Country	Postal Code		
MEMBER NOEL	CHRISTOPHE JACKSON	1120 30TH ST	LEWISTON	ID		83501		
5. Organized Under the Laws of	6. Annual Report mu	. Annual Report must be signed.*						
ID	Signature: Noel C	Signature: Noel Christopher Jackson			Date: 01/19/2018			
W 47061	Name (type or pr	Name (type or print): Noel Christopher Jackson			Title: Manager			
Processed 01/19/2018	* Electronically provi	* Electronically provided signatures are accepted as original signatures.						