No. <b>W 7588</b>		Due no later than Dec 31, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  COINER & WOOTEN, L.L.C. CHARLES H. COINER 3879 N 3800 E HANSEN ID 83334		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				528 BALLINGF TWIN FALLS	CHARLES H COINER 528 BALLINGRUDE DR TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies:	: Enter Nar	nes and Address	es of at least one Member or Manager.					
Office Held Na	ame		Street or PO Address	City	State	Country	Postal Code	
	Harles H Ichael Kif	COINER WOOTEN	528 BALLINGRUDE DR. 2173 EAGLECREST DR	TWIN FALLS FILER	ID ID		83301 83328	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 7588		Signature: Ch		Date: 10/13/2015				
		Name (type o	r print): Charles H Coiner		Title: Member			
Processed 10/13/2015	* Electronically provided signatures are accepted as original signatures.							