No. W 172645		Due no later than Oct 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. E2 NELSON LLC ERIC NELSON 5444 W. PARKRIDGE DRIVE BOISE ID 83714		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				ERIC NELSON 5444 W. PARKRIDGE DRIVE BOISE ID 83714 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nat		nes and Addresses of at least one Memb	er or Manager.				
Office Held	Name	Street or PO A		City	State	Country	Postal Code
MANAGER ERIC NELSO		N 5444 W. PARK	RIDGE DRIVE	BOISE	ID	USA	83714
5. Organized Under the Laws of: ID W 172645		6. Annual Report must be signed.* Signature: Eric Nelson Name (type or print): Eric Nelson	Date: 08/25/2017 Title: Owner				
Processed 08/25/2017 * Electronically provided signatures are accepted as original signatures.							