No. W 165441		Due no later than Apr 30, 2017	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. CFAY LLC CAREY PHILLIPS 1000 N ECHOHAWK WAY EAGLE ID 83616	1000 N ECH EAGLE ID	CAREY PHILLIPS 1000 N ECHOHAWK WAY EAGLE ID 83616-8361 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	CAREY PHIL	LIPS 1000	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: ID W 165441		6. Annual Report must be signed.* Signature: Carey Phillips Name (type or print): Carey Phillips	Date: 03/29/2017 Title: Member				
Processed 03/29/2017 * Electronically provided signatures are accepted as original signatures.							