No. W 38679		Due no later than Apr 30, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address: Correct in this box if needed. ROBERTS DUPLEX #1, L.L.C. MARY ANN ROBERTS PO BOX 4577 HAILEY ID 83333		- 22C CDOV C	MARY ANN ROBERTS 336 CROY CREEK CANYON HAILEY ID 83333 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			HAILEY ID				
NO FILING FEE IF RECEIVED BY DUE DATE	TIMILET ID 0	3333	or <u>rev</u> Region	area Agent of	gridiai		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MARY ANI	N ROBERTS	PO BOX 4577	HAILEY	ID		83333	
5. Organized Under the Laws of:	6. Annual Repor	t must be signed.*					
ID	Signature: Mary Ann Roberts		Dat	Date: 03/06/2017			
W 38679	Name (type or print): Mary Ann Roberts		Title	Title: Managing Member			
Processed 03/06/2017	* Electronically p	* Electronically provided signatures are accepted as original signatures.					