No. W 130206 Return to:		Due no later than Oct 31, 2016 Annual Report Form			2. Registered Agent and Address (NO PO BOX) KATHRYN KNIPE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TREY BIEN LLC KATHRYN N KNIPE 115 BROME DR VICTOR ID 83455		• v	115 BROME DR VICTOR ID 83455 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address	Cit	.y	State	Country	Postal Code
MANAGER KATHRYN NICOLE KNIPE		ICOLE KNIPE	115 BROME DRIVE	VIO	CTOR	ID	USA	83455
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kathryn Knipe			Date: 10/29/2016			
W 130206		Name (type or print): Kathryn Knipe			Title: President			
Processed 10/29/2016 * Electronically provided signatures are accepted as original signatures.								