No. **W 57695**	**Due no later than Jan 31, 2017**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** IMPERIAL TAXIDERMY, LLC MICHEL S SANCHOTENA 11305 W HAWKINS AVE NAMPA ID 83651	MICHEL S SANCHOTENA 11305 W. HAWKINS AVE. NAMPA ID 83651 3. New Registered Agent Signature:*

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
MANAGER	MICHEL S SANCHOTENA	11305 W. HAWKINS AVE.	NAMPA	ID		83651
MANAGER	SHIRLEY E. SANCHOTENA	11305 W. HAWKINS AVE.	NAMPA	ID		83651

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 57695**	Signature: Shirley E. Sanchotena	Date: 11/21/2016
	Name (type or print): Shirley E. Sanchotena	Title: Manager

Processed 11/21/2016

* Electronically provided signatures are accepted as original signatures.