

No. <b>W 152339</b>		<b>Due no later than Jun 30, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ZIP'S SELTICE LLC KELSEY WILDER 1645 E SELTICE WAY POST FALLS ID 83854 USA		KARIN FOWLER 11717 W RIVERVIEW DR POST FALLS ID 83854-8385			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> 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	
MEMBER	KARIN FOWLER	11717 W RIVERVIEW DR	POST FALLS	ID	USA	83854	
MEMBER	KELSEY WILDER	1645 E. SELTICE WAY	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of:  <b>ID</b> <b>W 152339</b>		6. Annual Report must be signed.*  Signature: Kelsey Wilder Name (type or print): Kelsey Wilder					
		Date: 05/11/2018 Title: Member					
Processed 05/11/2018 * Electronically provided signatures are accepted as original signatures.							