No. W 159665 Return to:		Due no later than Dec 31, 2017 Annual Report Form			2. Registered Agent and Address (NO PO BOX) SUSAN SCHAFFNER				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SCHAFFNER PROPERTY MANAGEMENT LLC SUSAN SCHAFFNER 22 SO. BLM DR SALMON ID 83467		S S	22 SO. BLM DR SALMON ID 83467 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses	of at least one Member or Manager.						
Office Held	Name		Street or PO Address	Cit	.y	State	Country	Postal Code	
MEMBER	HENRY A SCHAFFNER		22 SO. BLM DR	SA	LMON	ID	USA	83467	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: C.A. Bloodgood			Date: 12/12/2017				
W 159665		Name (type or print): C.A. Bloodgood			Title: Accountant				
Processed 12/12/2017	rocessed 12/12/2017 * Electronically provided signatures are accepted as original signatures.								