No. W 81075		Due no later than Feb 28, 2017		;	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CELIA PARKS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PARK - N - SON'S ARCHERY, LLC THOMAS A PARKINSON 975 PHEASANT CT MOUNTAIN HOME ID 83647			440 N 6TH E MOUNTAIN HOME ID 83647 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	THOMAS A	PARKINSON	975 PHEASANT CT		MOUNTAIN HOME	ID	USA	83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 81075		Signature: Thomas Parkinson			Date: 01/19/2017			
		Name (type or print): Thomas Parkinson			Title: Owner			
Processed 01/19/2017 * Electronically provided signatures are accepted as original signatures.								