No. W 180560	Du	Due no later than Mar 31, 2018			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	ADDRESS TO BE AND A SECOND	BIFID EULEZA HYMAS 420 S PALOMINO CIRCLE				
700 WEST JEEEEDSON		A CLEAR PERSPECTIVE LLC A HYMAS IINO CIRCLE		TY ID 83448-8344				
NO FILING FEE IF RECEIVED BY DUE DATE		20 00 1.0		3				
4. Limited Liability Companies: Enter	Names and Address	es of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
MANAGER LAYNE B HYMAS MANAGER BIFID EULEZA HYMAS		420 S PALOMINO CIRCLE 420 SOUTH PALOMINO CIRCLE	SUGAR CITY SUGAR CITY	ID ID	USA USA	83448 83448		
5. Organized Under the Laws of: 6. Annua		nnual Report must be signed.*						
ID	Signature: Bit	Signature: Bifid Euleza Hymas			Date: 01/24/2018			
W 180560	Name (type o	Name (type or print): Bifid Euleza Hymas		Title: Manager				
Processed 01/24/2018	* Electronically provided signatures are accepted as original signatures.							