No. W 58186 Return to:		Due no later than Jan 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. ARNIE, LLC MYRNA LOWRANCE 1300 W. OLSON AVE # 6 REEDLEY CA 93654 USA			2. Registered Agent and Address (NO PO BOX) MYRNA LOWRANCE 826 W 4TH ST KUNA ID 83634 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				KUNA ID				
				3. <u>New</u> Regis				
4. Limited Liability Compar	nies: Enter Nar	nes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MYRNA LOW		/RANCE	826 W 4TH ST	KUNA	ID		83634	
MANAGER	MANAGER JAY LOWRA		826 W 4TH ST	KUNA	ID		83634	
MANAGER	GREGORY T	LOWRANCE	826 W. 4TH STREET	KUNA	ID	USA	83634	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 58186		Signature: MYRNA LOWRANCE			Date: 12/16/2016			
		Name (type or pr		Title: MANAGER				
Processed 12/16/2016 * Electronically provided signatures are accepted as original signatures.								