No. W 6408		Due no later than Jun 30, 2017 Annual Report Form		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:					ALLISON MCGEACHIN 5839 N YAQUINA HEAD WAY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. "LEAPS & BOUNDS" LLC ALLISON MCGEACHIN 5839 N YAQUINA HEAD WAY GARDEN CITY ID 83714		GARDEN CITY	GARDEN CITY ID 83714 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER ALLISON MCGEACHIN		GEACHIN	5839 N YAQUINA HEAD WAY	GARDEN CITY	ID		83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Allison McGeachin			Date: 04/27/2017			
W 6408		Name (type or		Title: Manager				
rocessed 04/27/2017 * Electronically provided signatures are accepted as original signatures.								