No. W 55660		Due no later than Oct 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			TRAVIS J WAMBEKE			
SECRETARY OF STATE		1. Mailing Address: Correct in this box if needed.			1745 LORIEN LANE MOSCOW ID 83843			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		PALOUSE ENTERPRISES LLC TRAVIS WAMBEKE PO BOX 3493		MOSCOW	Prosecow ID 63643			
		MOSCOW ID 83843		3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies:	Enter Nar	nes and Address	es of at least one Member or Manager.					
Office Held Nar	me		Street or PO Address	City	State	Country	Postal Code	
	AVIS J W		1745 LORIEN LANE	MOSCOW	ID		83843	
MEMBER COI	CONNIE L WA		1745 LORIEN LANE	MOSCOW	ID		83843	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 55660		Signature: C	onnie Wambeke		Date: 09/18/2015			
		Name (type o	or print): Connie Wambeke		Title: Member			
Processed 09/18/2015	* Electronically provided signatures are accepted as original signatures.							