

No. W 161757	Due no later than Feb 28, 2017 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SITGRAVES, LLC SITGRAVES, LLC 19508 S HIGHWAY 3 CATALDO ID 83810	DAMON SITGRAVES 19508 S HIGHWAY 3 CATALDO ID 83810				
		3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	AMBRA JO SITGRAVES	16334 E. GARRISON DR.	EAST GARRISON	CA	USA	93933
5. Organized Under the Laws of: ID W 161757	6. Annual Report must be signed.* Signature: Damon Sitgraves Name (type or print): Damon Sitgraves Date: 01/23/2017 Title: Owner and Operator					
Processed 01/23/2017		* Electronically provided signatures are accepted as original signatures.				