

No. W 57504		Due no later than Dec 31, 2017		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. EVANS INSURANCE LLC ROBERT L EVANS 1221 W IRONWOOD DR 103 COEUR D'ALENE ID 83814		ROBERT L EVANS 1221 W IRONWOOD DR 103 COEUR D'ALENE ID 83814			
				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	ROBIN M EVANS	1702 N AUTUMN CREST CT	POST FALLS	ID	USA	83854	
MANAGER	DAVID L EVANS	1702 N AUTUMN CREST CT]	POST FALLS	ID	USA	83854	
MANAGER	ROBERT L EVANS	2706 E CHERRY HILL RD	COEUR D'ALENE	ID		83814	
MANAGER	CLAIRENE V A EVANS	2706 E CHERRY HILL RD	COEUR D'ALENE	ID		83814	
5. Organized Under the Laws of: ID W 57504		6. Annual Report must be signed.* Signature: Robert L Evans Name (type or print): Robert L Evans Date: 10/30/2017 Title: Manager					
Processed 10/30/2017		* Electronically provided signatures are accepted as original signatures.					