

No. W 943	Due no later than Mar 31, 2017 Annual Report Form			2. Registered Agent and Office (NOT A P.O. BOX) DERROLD SLAVIN 1015 MAIN ST SALMON ID 83467
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. NEW GILMORE L.L.C. DERROLD SLAVIN BOX 41 CARMEN ID 83462			3. New Registered Agent Signature.
NO FILING FEE IF RECEIVED BY DUE DATE				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Name	Street or PO Address	City	State Country Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Derrold Slavin	Box 41	CARMEN, Id	USA Lemhi 83462
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Bruce Slavin	Box 11	CARMEN, Id	USA Lemhi 83462
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Ted Slavin	520 BERNARDO Ave	MORRO Bay, Ca	USA 93442
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Tracy Brooks	644 E 78 Ave	Anchorage, Ak	USA 99503
5. Organized Under the Laws of: IDAHO W 943	6. Signature:	Date: <u>5-6-17</u>		
	Name (type or print):	Title: <u>Manager</u>		
Issued 04/28/2017 by SLD				
100189				