No. W 159786		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. DEPOCHAMBER LLC TONYA HERRIN 412 BLUE LAKES BLVD TWIN FALLS ID 83301		TONYA HERRIN 412 BLUE LAKES BLVD TWIN FALLS ID 83301-8330 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		USA mes and Addresses of at least one Member or Manager.						
Office Held	Name	ries and Addresses of a	Street or PO Address		City	State	Country	Postal Code
MEMBER ROMAN HER		RIN	412 BLUE LAKES		TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must Signature: Tonya He		Date: 01/0	06/2018			
W 159786		Name (type or print): Tonya Herrin		Title: Owner				
Processed 01/06/2018 * Electronically provided signatures are accepted as original signatures.								