No. C 161522	ı	Due no later than Jul 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		DWIGHT C JIVIDEN			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. CASCADE SOUTH, INC. DWIGHT C JIVIDEN 413 CABARTON RD CASCADE ID 83611		413 CABARTON RD CASCADE ID 83611			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DWIGHT C						
	CASCADE II			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Corporations: Enter Names and B	usiness Addresses o	f President, Secretary, and Directors. Treas	surer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY DWIGHT	C JIVIDEN	413 CABARTON ROAD	CASCADE	ID	USA	83611	
5. Organized Under the Laws of:	er the Laws of: 6. Annual Report must be signed.*						
ID	Signature: D	wight Jividen		Date: 05/19/2015			
C 161522 Name (typ		or print): Dwight Jividen	Title: Secretary				
Processed 05/19/2015	* Electronically	* Electronically provided signatures are accepted as original signatures.					