No. W 189505		Due no later than Oct 31, 2018	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. TRIANGLE C CABINS, LLC ARLEN B CROUCH P.O. BOX 43 JEROME ID 83338	112 SOUTH SUITE 3 JEROME ID	ARLEN B CROUCH 112 SOUTH LINCOLN SUITE 3 JEROME ID 83338 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	JEFF CLEGG	P.O. BOX 43	JEROME	ID	USA	83338	
5. Organized Under the Laws of: ID W 189505		6. Annual Report must be signed.* Signature: A. Blair Crouch Name (type or print): A. Blair Crouch	Date: 08/29/2018 Title: Agent				
Processed 08/29/2018 * Electronically provided signatures are accepted as original signatures.							