No. <b>W 116214</b>	Due no later than Aug 31, 2018	2. Registered Agent and Address (NO PO BOX)	
Return to:	Annual Report Form	HOLLY KERODIN	
SECRETARY OF STATE	1. Mailing Address: Correct in this box if need	eded. 1117 MAIN AVE ST MARIES ID 83861	
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	III ARMS COMPANY, LLC HOLLY A KERODIN PO BOX 195	31 MARIES ID 63801	
	SAINT MARIES ID 83861-0195	3. New Registered Agent Signature:*	
NO FILING FEE IF RECEIVED BY DUE DATE			
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.	er.	
Office Held Name	Street or PO Address	City State Country Postal C	Code
MANAGER HOLLY ANN	KERODIN PO BOX 195	SAINT MARIES ID USA 83861-0	)195
5. Organized Under the Laws of:	6. Annual Report must be signed.*		
ID	Signature: Holly Ann Kerodin	Date: 07/04/2018	
W 116214	Name (type or print): Holly Ann Kerodin	Title: Managing Member	
Processed 07/04/2018	* Electronically provided signatures are accepted as original	original signatures.	