

No. <b>W 62825</b>		<b>Due no later than May 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  SAGEBRUSH LLC 311 COURTHOUSE DR SALMON ID 83467		LARRY M THOMAS 311 COURTHOUSE DR SALMON ID 83467			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name LARRY M THOMAS	Street or PO Address 311 COURTHOUSE DR		City SALMON	State ID	Country	Postal Code 83467
5. Organized Under the Laws of:  <b>ID</b> <b>W 62825</b>	6. Annual Report must be signed.*  Signature: Larry M Thomas Name (type or print): Larry M Thomas  Date: 03/19/2018 Title: Manager						
Processed 03/19/2018 * Electronically provided signatures are accepted as original signatures.							