

STATE STATE	Idaho Limited Liability Company Annual Report Form			(
	File online at: SOSBIZ.idaho.gov		Return completed form within 30 days	
	Due on/Before: 01/31/2019	Reporting Year: 2018	Idaho Secretary of State Attn: Annual Reports	
Annual Report: No filing fee if received by due date.  If reinstatement is required, the reinstatement fee is \$30.00.			450 North 4th Street Boise, ID 83702 Phone: (208) 334-2300	
	Number: 5189	Filing Status: Active-Existing		
Limited Liability Company (D)		Date Formed: 01/06/1995	Formation Locale: ID	
Name and Ma	illing Address:	(1) A	dd or Change Mailing Address:	
	TED LIABILITY COMPANY	(1),70	ad of change maining , touress.	
1923 NEZ PEF		www.		
BOISE, ID 83	705			I
		-		
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-	gent (RA) and Registered O	office (RO) Address:	hange RA and/or RO Address:	
TOM NODZU				
1923 NEZ PER				
BOISE, ID 83	705			
		•		
	Note: The Registere	ed Office address must be a physical Ida	ho address (no postal box).	
(3) New Regis	stered Agent (RA) Signature	<b>:</b>		
(4) Limited Liabi These will not be	lity Companies: Enter names are accepted. Changes here will r	nd addresses of Managers OR Member not affect the entity mailing address. If	ers. Do NOT put 'same as last year' or 'same more space is needed, please add an attac	e as above' hment.
Manager/Member	Name	Business Address	City, State, Zip	
Mgr Mem	Tom Nodzu	1923 Nez Perc	e Boise 10 837	05
Mgr Mem				
Mgr Mem				
Mgr Mem				
Mgr Mem				
	,^			
(5) Signature:	19m- 7/10/2m	(6) Da	ate: $1 - 30 - 19$	

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.

Lawerence Denney