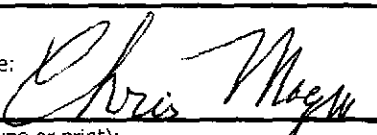


No. W 81424	Due no later than Feb 28, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) CHRIS MAGNUS 863 E HWY 2 OLDTOWN ID 83822
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. OLDTOWN BODY & PAINT, LLC 863 E HWY 2 OLDTOWN ID 83822		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> <i>Oldtown Body & Paint</i> <i>863 E Hwy 2</i> <i>Oldtown ID</i> <i>Boone</i> <i>83822</i>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 81424 </div>		6. Signature:  <hr/> Name (type or print): <i>Chris Magnus</i> <hr/> <div style="display: flex; justify-content: space-between;"> <div> Date: <i>320 17</i> <hr/> Title: <i>owner</i> <hr/> </div> </div>	
Issued 03/16/2017 by DK1		109071	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM