

No. <b>W 129244</b>		<b>Due no later than Sep 30, 2015</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>  ST. MARIES RIVER LODGE, L.L.C. KRISIT PAYNE PO BOX 315 ST MARIES ID 83861		KRISTI PAYNE 151 CASSANDRA HILLS RD ST MARIES ID 83861			
<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 MEMBER	Name MERRI JO GILMORE	Street or PO Address 90 CARLEY LANE		City ST. MARIES	State ID	Country USA	Postal Code 83861
5. Organized Under the Laws of:  <b>ID</b> <b>W 129244</b>		6. Annual Report must be signed.*  Signature: Kristi Payne Name (type or print): Kristi Payne  Date: 09/23/2015 Title: President					
Processed 09/23/2015 * Electronically provided signatures are accepted as original signatures.							