		later than Oct 31, 2015	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form  1. Mailing Address: Correct in this box if needed.		LAURA ELLIOTT 11029 RUNWAY DR BOISE ID 83714			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	OTH LLC LAURA ELLIOTT 11029 RUNWAY DR	OTH LLC LAURA ELLIOTT 11029 RUNWAY DR BOISE ID 83714					
	D 1000 A			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MARILYN MEYER		2976 E. STATE ST. #120 PMB #102	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID	Signature: Laura Ell	Signature: Laura Elliott		Date: 09/01/2015			
W 87329	Name (type or print	Name (type or print): Laura Elliott		Title: Manager			
Processed 09/01/2015	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					