

No. <b>W 160617</b>	<b>Due no later than Jan 31, 2017</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> FREDRIKSEN BROWN INSURANCE LLC 5420 FAIRVIEW AVE BOISE ID 83706		LAURA BROWN 5420 FAIRVIEW AVE BOISE ID 83706			
			3. <u>New</u> Registered Agent Signature:*			
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	ERIC FREDRIKSEN	5240 FAIRVIEW AVE	BOISE	ID	USA	83706
MEMBER	LAURA BROWN	5240 FAIRVIEW AVE	BOISE	ID	USA	83706
5. Organized Under the Laws of:  <b>ID W 160617</b>	6. Annual Report must be signed.* Signature: Laura Brown Name (type or print): Laura Brown		Date: 11/30/2016 Title: Member			
Processed 11/30/2016		* Electronically provided signatures are accepted as original signatures.				