No. W 175168		Due no later than Dec 31, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			EDMOND E MASON 3383B N 3100 E TWIN FALLS ID 83301			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. MASON'S TROPHIES & GIFTS LLC. EDMOND E. MASON 409 2ND AVE SO TWIN FALLS ID 83301 USA						
				3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Compa	nies: Enter Nai	nes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER MEMBER	EDMOND E. MASON BILLIE L. MASON VANCE P. MASON		3383B N 3100 E 3383B N 3100 E 3180 E 3670 N	TWIN FALLS TWIN FALLS KIMBERLY	ID ID ID	USA USA USA	83301 83301 83341	
5. Organized Under the Laws of: ID W 175168		6. Annual Report must be signed.* Signature: Billie L. Mason Date: 11/14/2017						
		Name (type or		Title: Secretary				
Processed 11/14/2017		* Electronically pr	ovided signatures are accepted as original	signatures.				