

No. W 144538		Due no later than Nov 30, 2016		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. VAPOR MAX LLC CRYSTAL MARIE ANTON 5932 MAIN STREET SUITE 3 BONNERS FERRY ID 83805 USA		GARY R RHOADS 6476 S MAIN ST STE B BONNERS FERRY ID 83805	
				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	CRYSTAL MARIE ANTON	5932 MAIN STREET SUITE 3	BONNERS FERRY	ID	USA 83805
5. Organized Under the Laws of: ID W 144538		6. Annual Report must be signed.* Signature: Crystal Anton Name (type or print): Crystal Anton Date: 09/27/2016 Title: Owner			
Processed 09/27/2016		* Electronically provided signatures are accepted as original signatures.			