

No. W 14912	Due no later than Mar 31, 2017 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. S & S, LLC SHAREE SKINNER 1030 BIG CREEK CIRCLE NAMPA ID 83686		SHAREE SKINNER 1030 BIG CREEK CIRCLE NAMPA ID 83686			
			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	COLLEEN SKAAR	3273 EAST 500 NORTH	LEWISVILLE	ID		83431
5. Organized Under the Laws of: ID W 14912		6. Annual Report must be signed.* Signature: ShaRee Skinner Name (type or print): ShaRee Skinner		Date: 01/21/2017 Title: Member		
Processed 01/21/2017		* Electronically provided signatures are accepted as original signatures.				