No. <b>W 31000</b>		Due no later than Jun 30, 2016		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JAMES S	JAMES S THORPE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  EXPEDITOR LLC  JAMES S. THORPE  248 N PALMETTO AVE  EAGLE ID 83616-5172		EAGLE ID	248 N PALMETTO AVE EAGLE ID 83616-5172  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 JAMES S TH		HORPE	248 N PALMETTO AVE	EAGLE	ID		83616-5172	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: James S Thorpe		Date	Date: 06/18/2016			
W 31000		Name (type o	or print): James S Thorpe	Title	Title: managing member			
Processed 06/18/2016		* Electronically provided signatures are accepted as original signatures.						