No. W 45695 Return to:			Due no later than Dec 31, 2017 Annual Report Form			2. Registered Agent and Address (NO PO BOX) SCOTT REECE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		JS DRYW SCOTT PO BOX :	ing Address: Correct in this box if neede (ALL, LLC D REECE	J	231 W AVE D JEROME ID 83338 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compa	anies: Enter	Names and Add	lresses of at least one Member or Manager.						
Office Held	Name		Street or PO Address	Cit	y	State	Country	Postal Code	
MEMBER	SCOTT F	REECE	231 W AVE D	JEF	ROME	ID		83338	
5. Organized Under the Laws of:		6. Annual R	6. Annual Report must be signed.*						
ID W 45695		Signatur	Signature: Scott Reece			Date: 12/31/2017			
		Name (ty	Name (type or print): Scott Reece			Title: member			
Processed 12/31/2017	ocessed 12/31/2017 * Electronically provided signatures are accepted as original signatures.								