

No. W 10454		Due no later than Dec 31, 2015 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		1. Mailing Address: Correct in this box if needed. THREE SISTERS LLC BRIAN CARNEY CPA PO BOX 3489 HAILEY ID 83333		BRIAN BARSOTTI 215 PICABO ST STE 304 KETCHUM ID 83340			
NO FILING FEE IF RECEIVED BY DUE DATE				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	WALTER STOECKLEIN	949 RT 910	CHESWICK	PA	USA	15624	
MEMBER	SHELLY STOECKLEIN	949 RT 910	CHESWICK	PA	USA	15624	
5. Organized Under the Laws of: ID W 10454		6. Annual Report must be signed.* Signature: WalterStoecklein Name (type or print): WalterStoecklein					
		Date: 10/23/2015 Title: Member					
Processed 10/23/2015		* Electronically provided signatures are accepted as original signatures.					