No. W 118656		Due no later than Nov 30, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		FREDERICK GREELEY				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			dress: Correct in this box if neede RICATION & REPAIR, LLC D 83303	_	3894 N 2500 E FILER ID 83303-8330 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	ELIZABETH T	THOMAS	PO BOX 253		TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Elizabeth Thomas		Date: 09/27/2016				
W 118656		Name (type or print): Elizabeth Thomas			Title: Office Manager			
Processed 09/27/2016		* Electronically provided signatures are accepted as original signatures.						