No. W 137383		Due no later than May 31, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MAGIC VALLEY POOL SUPPLY, LLC LAURA BAXTER 582 TROTTER DR TWIN FALLS ID 83301		582 TROTTER	LAURA BAXTER 582 TROTTER DR TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registere	3. New Registered Agent Signature:*			
100		nes and Address	es of at least one Member or Manager.					
	Name		Street or PO Address	City	State	Country	Postal Code	
	LAURA BAXTER WILLIAM E BAXTER JR		582 TROTTER DR. 582 TROTTER DR.	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 137383		Signature: La		Date: 03/22/2017				
		Name (type o	or print): Laura Baxter		Title: Member			
Processed 03/22/2017	* Electronically provided signatures are accepted as original signatures.							