No. W 5466 Return to:		Due no later than Feb 28, 2018 Annual Report Form		2	2. Registered Agent and Address (NO PO BOX) JERRY N. MADSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TWISTED J LIMITED LIABILITY COMPANY JERRY N. MADSEN BOX 456 DRIGGS ID 83422		_	650 SAND CRANE LN TETONIA ID 83452 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	JERRY N. M	ADSEN	650 SAND CRANE LN		TETONIA	ID		83452
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: jerry n madsen			Date: 02/09/2018			
W 5466		Name (type or print): jerry n madsen			Title: manager			
Processed 02/09/2018 * Electronically provided signatures are accepted as original signatures.								