No. W 100299		Due no later than Feb 29, 2016		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. WORKSHOP, LLC (THE) KARRIE E MONETTE 1270 ELDERBERRY CR COEUR D ALENE ID 83815		1270 ELDERBER	TYRELL G MONETTE 1270 ELDERBERRY CR COEUR D ALENE ID 83815			
				3. <u>New</u> Registered	3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Compa	nies: Enter Nai	nes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
Manager Manager	TYRELL G MONETTE KARRIE E MONETTE		1270 ELDERBERRY CR 1270 ELDERBERRY CR	COEUR D' ALENE COEUR D' ALENE		USA USA	83815 83815	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 100299		Signature: Tyrell Monette			Date: 01/12/2016			
		Name (type or print): Tyrell Monette			Title: Manager			
Processed 01/12/2016		* Electronically provided signatures are accepted as original signatures.						