

No. W 146796		Due no later than Jan 31, 2016		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		1. Mailing Address: Correct in this box if needed. CROFOOT INSURANCE LLC BART CROFOOT 33 RED ROCK STAGE ROAD SALMON ID 83467 USA		BART CROFOOT 33 RED ROCK STAGE ROAD SALMON ID 83467			
				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	
MANAGER	BART S CROFOOT	33 RED ROCK STAGE ROAD	SALMON	ID	USA	83467	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 146796		Signature: Bart Crofoot				Date: 11/19/2015	
		Name (type or print): Bart Crofoot				Title: President	
Processed 11/19/2015		* Electronically provided signatures are accepted as original signatures.					