

No. W 32319	Due no later than Aug 31, 2017 Annual Report Form		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. S & C LYNCH L.L.C. SCOTT LYNCH DBA:SCOTTYS DRIVE IN 560 NORTHGATE MILE IDAHO FALLS ID 83401		SCOTT LYNCH 4885 GEMMET CREEK DR IDAHO FALLS ID 83401			
			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	SCOTT LYNCH	4885 GEMMET CREEK DR	IDAHO FALLS	ID		83401
MANAGER	CHERYL A. LYNCH	4885 GEMMET CREEK DR.	IDAHO FALLS	ID		83401
5. Organized Under the Laws of: ID W 32319	6. Annual Report must be signed.* Signature: Scott Lynch Name (type or print): Scott Lynch		Date: 08/11/2017 Title: Owner			
Processed 08/11/2017		* Electronically provided signatures are accepted as original signatures.				