

No. W 118959	Due no later than Nov 30, 2016 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 & S PLUMBING, LLC. PO BOX 115 RIRIE ID 83443		SHAWN M FYFE 330 FIRST WEST RIRIE ID 83443			
			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	SHAMRA FYFE	PO BOX 115 330 FIRST WEST	RIRIE	ID	USA	83443
5. Organized Under the Laws of: ID W 118959	6. Annual Report must be signed.* Signature: Shamra Fyfe Name (type or print): Shamra Fyfe		Date: 10/26/2016 Title: Manager			
Processed 10/26/2016		* Electronically provided signatures are accepted as original signatures.				