

No. W 167700		Due no later than Jun 30, 2017		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		TIMOTHY A COX 184 PENNWOOD MERIDIAN ID 83642			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		DELUXE LAWN CARE LLC TIMOTHY A COX PO BOX 183 KUNA ID 83634					
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	TIMOTHY A COX	PO BOX 183	KUNA	ID	USA	83634	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 167700		Signature: TIMOTHY A COX				Date: 04/26/2017	
		Name (type or print): TIMOTHY A COX				Title: MANAGER	
Processed 04/26/2017		* Electronically provided signatures are accepted as original signatures.					