No. W 154271	Due no later than Jul 31, 2016		2. Re	2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form		DA	DAVID MCQUADE 2510 PALOUSE ST BOISE ID 83705-8370				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.							
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CELTIC SUNSHINE, LLC PO BOX 4233 MIDLOTHIAN VA 23112		ВС	BOISE ID 63/03-63/0				
			3. <u>Ne</u>	3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter N	ames and Addresses of at lea	ast one Member or Manager.						
Office Held Name	9	Street or PO Address	City	1	State	Country	Postal Code	
MANAGER DAVID MCQUADE		2510 PALOUSE ST	BOIS	SE	ID	USA	83705	
5. Organized Under the Laws of:	6. Annual Report must be signed.*							
ID	ID Signature: David McQuade			Date: 09/14/2016				
W 154271	Name (type or print): David McQuade			Title: Manager				
Processed 09/14/2016	* Electronically provided signatures are accepted as original signatures.							