

| | | | | | |
|--|---------------|--|---------------|---|---------------------|
| No. W 17679 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. GEERMAN GROUP, LLC KARLA GOWAN 2900 N GOVERNMENT WAY STE 127 COEUR D ALENE ID 83815 | | JOHN GEERMAN 2900 N GOVERNMENT WAY STE 127 COEUR D'ALENE ID 83815 | |
| | | | | 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 | KARLA J GOWAN | 2900 N. GOVERNMENT WAY #127 | COEUR D'ALENE | ID | 83815 |
| 5. Organized Under the Laws of: ID W 17679 | | 6. Annual Report must be signed.* Signature: Karla J. Gowan Name (type or print): Karla J. Gowan Date: 02/26/2016 Title: Manager | | | |
| Processed 02/26/2016 | | * Electronically provided signatures are accepted as original signatures. | | | |