No. W 73919		Due no later than May 31, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. IDAHO RECLAMATION GROUP LLC ROBERT B FAULL PO BOX 5188 POICE ID 82375		4103 HILLC	ROBERT B FAULL 4103 HILLCREST DR BOISE ID 83705 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		BOISE ID 837	05	3. <u>New</u> Registi	3. <u>Ivew</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	ROBERT B	FAULL	4103 HILLCREST DR	BOISE	ID		83705	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 73919		Signature: Robert Faull			Date: 05/30/2018			
		Name (type or print): Robert Faull			Title: Manager			
Processed 05/30/2018 * Electronically provided signatures are accepted as original signatures.								