




No. W 60560	Due no later than Mar 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) CHRISTIAN L BUNTY 243 OVERLAKE VIEW RD COCOLALLA ID 83813
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. A-TEAM EXCAVATING, LLC CHRIS BUNTY PO BOX 415 SAGLE ID 83860		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Chris Buntz	P.O. Box 415	Sagle	ID	BONNER	
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 60560 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: 3-14-17 </td> </tr> <tr> <td> Name (type or print): Chris Buntz </td> <td> Title: OWNER </td> </tr> </table>	Signature: 	Date: 3-14-17	Name (type or print): Chris Buntz	Title: OWNER
Signature: 	Date: 3-14-17				
Name (type or print): Chris Buntz	Title: OWNER				

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