No. W 53668		Due no later than Aug 31, 2018		2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		0.0000000000000000000000000000000000000	JAY PAUL JOHNSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.			3539 BRIAR CREEK LANE STE E IDAHO FALLS ID 83406			
		MOUNTAIN RIDGE ESTATES, LLC JAY PAUL JOHNSON 329 S WOODRUFF AVE IDAHO FALLS ID 83401			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nar	nes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	JAY PAUL JO		3539 BRIAR CREEK LANE STE E	IDAHO FAL			83406	
MEMBER GREG HANSI			3539 BRIAR CREEK LANE STE E	IDAHO FAL		USA	83401	
MEMBER SHON DENNI			3539 BRIAR CREEK LANE STE E	IDAHO FAL	and the second s	USA	83406	
MEMBER	JAY JOHNSC	N	3539 BRIAR CREEK LANE STE E	IDAHO FAL	LS ID	USA	83406	
5. Organized Under the Laws of:		6. Annual Report						
ID W 53668		Signature: JA		Date: 08/09/2018				
		Name (type or		Title: MANAGER				
Processed 08/09/2018		* Electronically pr	ovided signatures are accepted as origin	al signatures.	•			