No. <b>W 118823</b>		Due no later than Nov 30, 2016	2. Registered A	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.  POMEROY SCHOW, LLC  208 SUNNYHILL CIRCLE  TWIN FALLS ID 83301	208 SUNNYH TWIN FALLS	KAREN KASTER 208 SUNNYHILL CIRCLE TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE							
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	KAREN KAS	TER 208 SUNNYHILL CIR	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Karen Kaster	Date: 10	Date: 10/05/2016			
W 118823		Name (type or print): Karen Kaster	Title: M	Title: Managing Member			
Processed 10/05/2016		* Electronically provided signatures are accepted as original signatures.					