

No. W 9534		Due no later than Aug 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. JOMAR, LLC JON JOHNSON 1053 E 1300 N SHELLEY ID 83274		JON JOHNSON 5345 HEYREND CIR IDAHO FALLS ID 83402	
				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	JON JOHNSON	POB 51920	IDAHO FALLS	ID	83405
5. Organized Under the Laws of: ID W 9534		6. Annual Report must be signed.* Signature: Jon Johnson Name (type or print): Jon Johnson Date: 08/17/2016 Title: Manager			
Processed 08/17/2016		* Electronically provided signatures are accepted as original signatures.			