

No. W 108588	Due no later than Nov 30, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) SHARON ZENTZIS 1100 WALKER RD VIOLA ID 83872-9788																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. MARJORIE ANDERSON FAMILY, LLC (THE) SHARON ZENTZIS 1100 WALKER RD VIOLA ID 83872-9788		3. <u>New</u> Registered Agent Signature.																																			
NO FILING FEE IF RECEIVED BY DUE DATE																																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Shirley A. Hornbaker</td> <td>2404 W. Desha</td> <td>Seawick</td> <td>WA</td> <td>USA</td> <td>99336-3007</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Sharon K. Zentzis</td> <td>1100 WALKER RD</td> <td>Viola</td> <td>ID</td> <td>USA</td> <td>83872-9788</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Shirley A. Hornbaker	2404 W. Desha	Seawick	WA	USA	99336-3007	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Sharon K. Zentzis	1100 WALKER RD	Viola	ID	USA	83872-9788	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>									
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 108588 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <u>Sharon K. Zentzis</u> </td> <td style="width: 40%;"> Date: <u>10-03-2017</u> </td> </tr> <tr> <td> Name (type or print): <u>Sharon K. Zentzis</u> </td> <td> Title: <u>MANAGER</u> </td> </tr> </table>			Signature: <u>Sharon K. Zentzis</u>	Date: <u>10-03-2017</u>	Name (type or print): <u>Sharon K. Zentzis</u>	Title: <u>MANAGER</u>																															
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Issued 09/21/2017 by JL1		114912																																				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM