

(Instructions on back of application)

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SECRETARY OF STATE STATE OF IDAHO

The complete street and mailin	g addresses of the initial designated/principal office: 685 Willow Dr
(Street Address)	Mtn. Home, ID. 83647
(Mailing Address, if different than street add	
The name and complete street	address of the registered agent:
Clarence Sather	685 Willow Dr. Mtn. Home, ID. 83647
(Name)	(Street Address)
The name and address of at le company: Name	ast one member or manager of the limited liability Address
Dan Sather	685 Willow Dr. Mtn. Home, ID. 83647
Clndy M Sather	685 Willow Dr. Mtn. Home, ID. 83647
Dan Ross	3754 SW.hoagland Dr. Mtn. Home ID.83647
Andrea Ross	3754 SW.hoagland Dr. Mtn. Home ID.83647
Mailing address for future corre	espondence (annual report notices):
and the second of the second o	espondence (annual report notices): Willow Dr. Mtn. Home, ID. 83647
685	Willow Dr. Mtn. Home, ID. 83647
685	Willow Dr. Mtn. Home, ID. 83647
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