

No. <b>W 43079</b>	<b>Due no later than Sep 30, 2016</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  ROWEN LLC CHARLES R. ROWEN 29500 OLD FORT BOISE RD PARMA ID 83660	CHARLES R ROWEN 29500 OLD FORT BOISE RD PARMA ID 83660	
		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	CHARLES R ROWEN	29500 OLD FORT BOISE RD	PARMA ID 83660
MANAGER	JACQUELYN ROWEN	29500 OLD FORT BOISE RD	PARMA ID 83660
5. Organized Under the Laws of:  <b>ID W 43079</b>	6. Annual Report must be signed.* Signature: Jacquelyn J Rowen Name (type or print): Jacquelyn J Rowen		Date: 08/10/2016 Title: Secretary
Processed 08/10/2016		* Electronically provided signatures are accepted as original signatures.	