No. W 19712		Due no later than Jun 30, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JAMES D DICKINSON 609 N SYRINGA ST POST FALLS ID 83877			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. GLACIER INSURANCE SERVICES LLC JAMES D DICKINSON 609 N SYRINGA STREET POST FALLS ID 83854 USA						
				POST FALLS				
				3. <u>New</u> Registere	3. New Registered Agent Signature:*			
4. Limited Liability Compar	nies: Enter Nar	nes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	GER JAMES D DICKINSON		609 N SYRINGA STREET	POST FALLS	ID		83854	
MANAGER			609 N SYRINGA STREET	POST FALLS	ID	USA	83854	
MEMBER DONALD K R			9390 N MAPLE ST	HAYDEN	ID	USA	83835	
MEMBER	RYAN BARNE	: 5	609 N SYRINGA STREET	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 19712		Signature: James D Dickinson		Date:	Date: 08/12/2015			
		Name (type or print): James D Dickinson		Title: Managing Member				
Processed 08/12/2015	* Electronically provided signatures are accepted as original signatures.							