No. W 66913		Due no later than Sep 30, 2016		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			KEISHA L OXENDINE 700 BANK STREET, STE 200 WALLACE ID 83873 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		ed.				
		KEISHA L. OXENDINE ATTORNEY AT LAW, L.L.C. KEISHA L OXENDINE PO BOX 633 OSBURN ID 83849		3				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER KEISHA L OXE		XENDINE	PO BOX 633		OSBURN	ID		83849
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 66913		Signature: Keisha Oxendine			Date: 08/03/2016			
		Name (type or print): Keisha Oxendine			Title: Owner/Manager			
Processed 08/03/2016		* Electronically provided signatures are accepted as original signatures.						