No. W 115767		Due no later than Jul 31, 2015 2. Registered Agent and Address (NO PO B				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. TRIPLE 8 LLC TARA LAVIER 2126 S BUCK PASS AVE BOISE ID 83709	2126 S BU BOISE ID	TARA LAVIER 2126 S BUCK PASS AVE BOISE ID 83709 3. New Registered Agent Signature:*		
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nat		mes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER TARA LAVIE		R 2126 S BUCK PASS AVE	BOISE	ID	USA	83709
5. Organized Under the Laws of: ID W 115767		6. Annual Report must be signed.* Signature: tara lavier Name (type or print): tara lavier	Date: 06/02/2015 Title: manager			
Processed 06/02/2015 * Electronically provided signatures are accepted as original signatures.						