No. <b>W 109704</b>	Due no later than Jan 31, 2018	2. Registered A	2. Registered Agent and Address (NO PO BOX)		
Return to:	Annual Report Form		KALEN DODGE 970 RIDGE ROAD MCCALL ID 83638		
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  BROKEN HORN BREWING COMPANY LLC.  KALEN DODGE PO BOX 1674				
	MCCALL ID 83638	3. <u>New</u> Registe	3. New Registered Agent Signature:*		
NO FILING FEE IF RECEIVED BY DUE DATE					
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 KALEN DO MANAGER JENNA DO		MCCALL MCCALL	ID ID	USA USA	83638 83638
5. Organized Under the Laws of: 6. Annual Report must be signed.*					
ID	Signature: Kalen Dodge		Date: 11/30/2017		
W 109704	Name (type or print): Kalen Dodge		Title: manager		
Processed 11/30/2017	* Electronically provided signatures are accepted as original signatures.				