No. W 60719		Due no later than Mar 31, 2016		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
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. LGL, L.L.C. ANDREW LYDA 542 STONEHEDGE WAY TWIN FALLS ID 83301		542 STONEHE TWIN FALLS	ANDREW C LYDA 542 STONEHEDGE WAY TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
200	s: Enter Nar	nes and Addresse	es of at least one Member or Manager.					
Office Held N	lame		Street or PO Address	City	State	Country	Postal Code	
Total Control	ANDREW C LYDA AMANDA LYDA		542 STONEHEDGE WAY 542 STONEHEDGE WAY	TWIN FALLS TWIN FALLS	ID ID	USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: AN		Date: 03/18/2016				
W 60719		Name (type o		Title: Member				
Processed 03/18/2016 * Electronically provided signatures are accepted as original signatures.								