

No. W 146873	Due no later than Jan 31, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: 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.		CHAD D FOUST 95 PONDER POINT DR SANDPOINT ID 83864-8386			
	FOUST HOLDINGS, LLC CHAD D FOUST 477272 HWY 95 N PONDERAY ID 83852		3. <u>New</u> Registered Agent Signature:*			
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	CHAD D FOUST	95 PONDER POINT DR	SANDPOINT	ID	USA	83864-8386
MEMBER	STEVEN M FOUST	913 CATTAIL CT	SANDPOINT	ID	USA	83864
MANAGER	MARGARET R FOUST	95 PONDER POINT DR	SANDPOINT	ID	USA	83864-8386
5. Organized Under the Laws of: ID W 146873	6. Annual Report must be signed.*					
		Signature: Chad Foust	Date: 11/27/2017			
		Name (type or print): Chad Foust	Title: Manager			
Processed 11/27/2017		* Electronically provided signatures are accepted as original signatures.				