No. <b>W 151417</b>		Due no later than May 31, 2017		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ALAN CLAW	ALAN CLAWSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  DREAM VENTURES LLC  ALAN R CLAWSON 537 15TH ST.  Rupert ID 83350		RUPERT ID	537 15TH ST. RUPERT ID 83350  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Comp	anies: 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	
MEMBER	ALAN R CLAWSON		537 15TH ST.	RUPERT	ID	USA	83350	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Alan R Clawson			Date: 07/10/2017			
W 151417		Name (type o		Title: Owner				
Processed 07/10/2017 * Electronically provided signatures are accepted as original signatures.								