No. W 107512 Return to:		Due no later than Oct 31, 2015 Annual Report Form		2	2. Registered Agent and Address (NO PO BOX) STEVE BYERS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SCJJ, LLC CARISSA BYERS PO BOX 567 KIMBERLY ID 83341			3490 E 3200 N KIMBERLY ID 83341 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compar	nies: Enter Na	ames and Addres	sses of at least one Member or Manager.						
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
MEMBER	CARISSA E	BYERS	3490 E 3200 N		KIMBERLY	ID	USA	83341	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Carissa Byers			Date: 11/24/2015				
W 107512		Name (type or print): Carissa Byers			Title: Owner				
Processed 11/24/2015	ocessed 11/24/2015 * Electronically provided signatures are accepted as original signatures.								