

No. W 160001		Due no later than Dec 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. SMOCK, LLC CONNIE SMOCK 3423 S CADET AVE BOISE ID 83706		UNITED STATES CORPORATION AGEN 800 W MAIN ST STE 1460 BOISE ID 83702			
				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	
MEMBER	CONNIE SMOCK	3423 S. CADET AVE	BOISE	ID	USA	83706	
5. Organized Under the Laws of: ID W 160001		6. Annual Report must be signed.* Signature: Connie Smock Name (type or print): Connie Smock Date: 10/31/2016 Title: Primary					
Processed 10/31/2016		* Electronically provided signatures are accepted as original signatures.					