


No. W 16823	Due no later than Oct 31, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) DONALD S KLINE 5253 COUGAR ESTATES RD COEUR D'ALENE ID 83814
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. GOODFELLOW, LLC PO BOX 566 COEUR D ALENE ID 83816		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Donald S Kline	5253 Cougar Estates Rd	Coeur d'Alene	Id	USA	83814
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Leslie A Kline	" "	" "	" "	" "	" "
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 16823 </div>	6. Signature:  <hr/> Name (type or print): <div style="border-bottom: 1px solid black; padding: 2px 0;">Donald S. Kline</div>	Date: <u>9-29-16</u> Title: <u>Managing member</u>
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INSTRUCTIONS FOR FILING THE ANNUAL REPORT FORM