

No. W 17838	Due no later than Jan 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) C MARLENE SNIDER 1921 GRELLE AVE LEWISTON ID 83501 
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. LEWIS CLARK TRADER L.L.C. 1921 GRELLE AVE LEWISTON ID 83501		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 type="checkbox"/> Member <input type="checkbox"/>	C. Marlene Snider,	POB 219,	Lewiston,	ID		
			Nez Perce			83501
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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-weight: bold;">IDAHO W 17838</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>1/02/17</u> </td> </tr> <tr> <td> Name (type or print): C. Marlene Snider </td> <td> Title: Owner </td> </tr> </table>	Signature: 	Date: <u>1/02/17</u>	Name (type or print): C. Marlene Snider	Title: Owner
Signature: 	Date: <u>1/02/17</u>				
Name (type or print): C. Marlene Snider	Title: Owner				

Issued 12/29/2016 by JL1
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