

No. <b>W 174901</b>		<b>Due no later than Nov 30, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )		
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  COEUR D' ALENE OF CASCADIA LLC COEUR D' ALENE OF CASCADIA 408 S EAGLE RD STE 205 EAGLE ID 83616 USA		REGISTERED AGENT SOLUTIONS INC 921 S ORCHARD ST STE G BOISE ID 83705		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MEMBER	Name OWEN HAMMOND	Street or PO Address 408 S EAGLE RD SUITE 205	City EAGLE	State ID	Country USA	Postal Code 83616
5. Organized Under the Laws of:  <b>DE</b> <b>W 174901</b>		6. Annual Report must be signed.*  Signature: Owen Hammond Name (type or print): Owen Hammond  Date: 09/18/2017 Title: President				
Processed 09/18/2017      * Electronically provided signatures are accepted as original signatures.						