

No. <b>W 40981</b>	<b>Due no later than Jul 31, 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>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  BLUE WAVE LLC WESLEY T SMITH 500 W 21ST ST IDAHO FALLS ID 83402 USA		WESLEY T SMITH 500 W 21ST ST IDAHO FALLS ID 83402			
			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
MANAGER	WESLEY T SMITH	5126 E RIRIE HWY	IDAHO FALLS	ID		83401
MANAGER	ROXANNE SMITH	5126 E RIRIE HWY	IDAHO FALLS	ID		83401
5. Organized Under the Laws of:  <b>ID W 40981</b>	6. Annual Report must be signed.* Signature: Wesley T. Smith Name (type or print): Wesley T. Smith		Date: 05/19/2017 Title: Manager			
Processed 05/19/2017		* Electronically provided signatures are accepted as original signatures.				