No. W 112296		Due no later than Mar 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		DOREEN WORKMAN				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. DOE DOE VENTURES LLC DOE DOE VENTURES 4027 HWY 6 HARVARD ID 83834		ed.	4027 HWY 6 HARVARD ID 83834 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	DOREEN M	WORKMAN	4027 HWY 6		HARVARD	ID	USA	83834
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Doreen Workman			Date: 03/31/2017			
W 112296		Name (type or print): Doreen Workman			Title: Manager			
Processed 03/31/2017 * Electronically provided signatures are accepted as original signatures.								