

No. <b>W 5318</b>		<b>Due no later than Jan 31, 2018</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>  MOUNTAIN PMS, LLC ELIZABETH SMITH P O BOX 2353 EAGLE ID 83616-9116		ELIZABETH SMITH 1598 NORTH CANADA ROAD STAR ID 83669		
<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 ELIZABETH N SMITH	Street or PO Address P O BOX 2353	City EAGLE	State ID	Country	Postal Code 83616-9116
5. Organized Under the Laws of:  <b>ID</b> <b>W 5318</b>		6. Annual Report must be signed.*  Signature: Elizabeth Smith Name (type or print): Elizabeth Smith  Date: 12/21/2017 Title: Pres				
Processed 12/21/2017      * Electronically provided signatures are accepted as original signatures.						