

| | | | | | |
|--|----------------|---|--------|--|---------------------|
| No. W 127378 | | Due no later than Jul 31, 2017 | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form | | KIPP A HILL 771 N BASELINE RD TETONIA ID 83452 | |
| | | 1. Mailing Address: Correct in this box if needed. WESTERN FORM WORKS, LLC SHAWN G MILLER PO BOX 199 VICTOR ID 83455 | | 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 |
| MEMBER | SHAWN G MILLER | PO BOX 199 | VICTOR | ID | USA 83455 |
| 5. Organized Under the Laws of: ID W 127378 | | 6. Annual Report must be signed.* Signature: Shawn Miller Name (type or print): Shawn Miller Date: 07/13/2017 Title: member | | | |
| Processed 07/13/2017 | | * Electronically provided signatures are accepted as original signatures. | | | |