No. **W 117225**	**Due no later than Sep 30, 2017** **Annual Report Form**	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**	**1. Mailing Address: Correct in this box if needed.** SWIARS LLC SWIARS LLC 8814 FAIRVIEW AVE BOISE ID 83704	MARK D WIARS 8814 FAIRVIEW AVE BOISE ID 83704 3. New 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	MARK D. WIARS	8814 FAIRVIEW AVENUE	BOISE	ID	USA	83704

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 117225**	Signature: Mark Wiars	Date: 09/19/2017
	Name (type or print): Mark Wiars	Title: Member

Processed 09/19/2017

* Electronically provided signatures are accepted as original signatures.