No. <b>W 53092</b>		Due no later than Jul 31, 2016 Annual Report Form  1. Mailing Address: Correct in this box if needed.  PINE STREET OFFICE LLC JOHN HENDRICKS 418 PINE STREET SANDPOINT ID 83864		2. Registered	2. Registered Agent and Address (NO PO BOX)  ALL DAY \$49 IDAHO REGISTERED A 1900 NORTHWEST BLVD STE 106A COEUR D ALENE ID 83814  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE				1900 NORT				
				3. <u>New</u> Regist				
4. Limited Liability Compar Office Held		nes and Address	ses of at least one Member or Manager.	C:L.	Chaha	Carratan	Deatel Cada	
MANAGER MANAGER	Name JOHN HENDRICKS ANNE HENDRICKS		Street or PO Address 8267 SAGLE RD 8267 SAGLE RD	City SAGLE SAGLE	State ID ID	Country	Postal Code 83860 83860	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Anne Hendricks Date: 07/08/2016						
W 53092		Name (type or print): Anne Hendricks Title: Vice President						
Processed 07/08/2016 * Electronically provided signatures are accepted as original signatures.								