No. W 84140		Due no later than May 31, 2017		2.	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. DEITY, LLC SADIE DAVIES 16100 N ELDER ST NAMPA ID 83687			SADIE DAVIES 16100 N ELDER ST. NAMPA ID 83687 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address	(City	State	Country	Postal Code
MEMBER SADIE B DAVIES		VIES	16100 N ELDER ST.	N	NAMPA	ID	USA	83681
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Sadie Davies			Date: 03/17/2017			
W 84140		Name (type or print): Sadie Davies			Title: Owner/Member			
Processed 03/17/2017 * Electronically provided signatures are accepted as original signatures.								