

No. W 162939		Due no later than Feb 28, 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		1. Mailing Address: Correct in this box if needed. BOM, LLC BOM LLC 1236 BLUE LAKES BLVD N TWIN FALLS ID 83301		NATHAN THOMPSON 2372 JULIE LANE TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				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	RUTH MORRISON	2552 STONEBURY LOOP RD	SPRINGVILLE	UT	USA	84663	
MEMBER	NATHAN THOMPSON	2372 JULIE LANE	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID W 162939		6. Annual Report must be signed.* Signature: Nathan Thompson Name (type or print): Nathan Thompson					
		Date: 03/15/2017 Title: Member Manager					
Processed 03/15/2017 * Electronically provided signatures are accepted as original signatures.							