No. W 28275	Due no later than Jan 31, 2018		2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	Annual Report Form 1. Mailing Address: Correct in this box if needed. OLSON PROPERTY LLC KEVIN SHOEMAKER		241 SW 3RD	KEVIN SHOEMAKER 241 SW 3RD ST FRUITLAND ID 83619				
NO FILING FEE IF RECEIVED BY DUE DATE	PO BOX 403 FRUITLAND 1	PO BOX 403 FRUITLAND ID 83619		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 KEVIN SH MANAGER JERETTA	DEMAKER SHOEMAKER	7170 DENVER RD 7170 DENVER RD	FRUITLAND FRUITLAND	ID ID		83619 83619		
5. Organized Under the Laws of: 6. Annual Re		t must be signed.*						
ID	Signature: Ke	Signature: Kevin Shoemaker			Date: 11/29/2017			
W 28275	Name (type o	Name (type or print): Kevin Shoemaker		Title: Manager				
Processed 11/29/2017	* Electronically p	* Electronically provided signatures are accepted as original signatures.						