

No. W 172972	Due no later than Oct 31, 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. NICKLAS FAMILY, LLC PO BOX 587 SAGLE ID 83860		DIANE NICKLAS 686 GALLOP CIRCLE SAGLE ID 83860			
			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
MANAGER	DIANE C NICKLAS	686 GALLOP CIRCLE	SAGLE	ID	USA	83860
5. Organized Under the Laws of: ID W 172972	6. Annual Report must be signed.* Signature: Diane C Nicklas Name (type or print): Diane C Nicklas		Date: 10/29/2017 Title: Manager			
Processed 10/29/2017		* Electronically provided signatures are accepted as original signatures.				