No. **W 9602**	**Due no later than Aug 31, 2018** **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.** SIBS, LLC MARGARET M WATSON POBOX 300 PARMA ID 83660	MARGARET WATSON 29580 APPLE VALLEY RD PARMA ID 83660 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	JON C WATSON	29580 APPLE VALLEY RD	PARMA	ID		83660
MANAGER	MARGARET M WATSON	29580 APPLE VALLEY RD	PARMA	ID		83660

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: Doug DeLong	Date: 06/18/2018
W 9602	Name (type or print): Doug DeLong	Title: controller

Processed 06/18/2018

* Electronically provided signatures are accepted as original signatures.