

No. W 146607	Due no later than Jan 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. JLCS LLC JOSHUA LYDEN 2935 ELIZABETH BLVD TWIN FALLS ID 83301 USA		JOSHUA LYDEN 2935 ELIZABETH BLVD TWIN FALLS ID 83301-8334			
			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	JOSHUA AARON LYDEN	2935 ELIZABETH BLVD	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID W 146607	6. Annual Report must be signed.* Signature: Joshua Lyden Name (type or print): Joshua Lyden		Date: 12/22/2017 Title: Manager			
Processed 12/22/2017		* Electronically provided signatures are accepted as original signatures.				