




No. W 167250	Due no later than Jun 30, 2018 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) NORTHWEST REGISTERED AGENT LLC 784 S CLEARWATER LOOP STE B POST FALLS ID 83854-9750 USA																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. OREGON LAND AND WILDLIFE LLC 3811 CRATER LAKE HWY STE B MEDFORD OR 97504		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Garrett Zoller</td> <td>3811 Crater Lake Hwy, Suite B,</td> <td>Medford,</td> <td>OR</td> <td>USA</td> <td>97504</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Timothy O'Neil</td> <td>3811 Crater Lake Hwy, Suite B,</td> <td>Medford,</td> <td>OR</td> <td>USA</td> <td>97504</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Garrett Zoller	3811 Crater Lake Hwy, Suite B,	Medford,	OR	USA	97504	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Timothy O'Neil	3811 Crater Lake Hwy, Suite B,	Medford,	OR	USA	97504	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: OREGON W 167250		6. <table border="1"> <tr> <td>Signature: </td> <td>Date:</td> </tr> <tr> <td>Signed by:</td> <td>05/22/2018</td> </tr> <tr> <td>Name (type or print):</td> <td>Title:</td> </tr> <tr> <td>Garrett Zoller</td> <td>Designated Broker</td> </tr> </table>		Signature: 	Date:	Signed by:	05/22/2018	Name (type or print):	Title:	Garrett Zoller	Designated Broker																											
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM