No. W 162572		Due no later than Feb 28, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			LEEANN MACKLIN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MACKLIN ENTERPRISES, LLC LEEANN MACKLIN 204 W COLLEGE AVE ST MARIES ID 83861		ST MARIES 1	204 W COLLEGE AVE ST MARIES ID 83861 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	anies: Enter Nai	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER LEEANN MACKLIN		CKLIN	204 W COLLEGE AVENUE	ST MARIES	ID	USA	83861	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: LeeAnn Macklin		Da	Date: 04/03/2017			
W 162572		Name (type o	or print): LeeAnn Macklin	Tit	Title: office manager			
Processed 04/03/2017 * Electronically provided signatures are accepted as original signatures.								