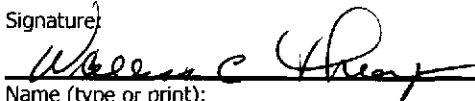
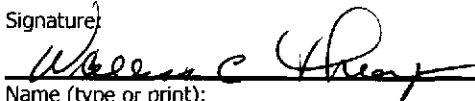
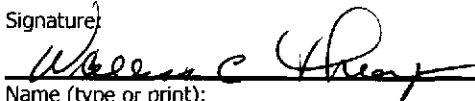


No. W 135376	Due no later than Mar 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) WALLESS THOMPSON 1812 E LINDEN CALDWELL ID 83605
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. PRO PACK & MORE LLC WALLESS THOMPSON 1812 E LINDEN CALDWELL ID 83605		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	WALLESS THOMPSON	1812 E LINDEN	CALDWELL	ID	USA	83605
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	I AM SELF EMPLOYED	603 E IDAHO AVE	BOISE	ID	USA	83709
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	APRIL BAIRD	603 E IDAHO AVE	BOISE	ID	USA	83709
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	WHEED	603 E IDAHO AVE	BOISE	ID	USA	83709
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	RYAN HORTON	607 E IDAHO AVE	BOISE	ID	USA	83709
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	CARY ROSS	10825 W. BOWLESTOWER	BOISE	ID	USA	83709

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 135376 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>03-10-17</u> </td> </tr> <tr> <td> Name (type or print): <u>WALLESS C. THOMPSON</u> </td> <td> Title: <u>OWNER</u> </td> </tr> </table>	Signature: 	Date: <u>03-10-17</u>	Name (type or print): <u>WALLESS C. THOMPSON</u>	Title: <u>OWNER</u>
Signature: 	Date: <u>03-10-17</u>				
Name (type or print): <u>WALLESS C. THOMPSON</u>	Title: <u>OWNER</u>				

Issued 03/06/2017 by SLD
122885

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM