

<b>No. W 143281</b>	<b>Due no later than Jan 31, 2017</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> DAKOTA KANGAS 1220 N 4TH STREET SPACE 63 PARMA ID 83660
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> DJ MOBILE HOME SET-UP LLC DAKOTA KANGAS 1220 N 4TH STREET SPACE 63 PARMA ID 83660		<b>3. <u>New</u> Registered Agent Signature.</b>

**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"/>	Dakota	Kangas	1220 Nth	4th St	space 63	parma ID USA 83660
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

<b>5. Organized Under the Laws of:</b>  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 143281</b> </div>	<b>6.</b> Signature: <u><i>Dakota Kangas</i></u> Date: <u>12,21,2016</u> Name (type or print): <u>Dakota Kangas</u> Title: <u>owner</u>
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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1: Entity name may not be altered through the use of this form.** Pay special attention to the mailing address. If the