No. W 45316		Due no later than Dec 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHAEL A LEE			
SECRETARY OF STATE	1. Mailin	1. Mailing Address: Correct in this box if needed. LEE ENTERPRISES, LLC MICHAEL A LEE 1083 E WARM SPRINGS AVE POST FALLS ID 83854		1083 E WARM SPRINGS AVE POST FALLS ID 83854 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MICHAEL 1 1083 E WA						
	POST FALL						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ent	er Names and Addre	esses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MICHA	EL A LEE	1083 E WARM SPRINGS AVE	POST FALLS	ID		83854	
MEMBER LOVON	INA R LEE	1083 E WARM SPRINGS AVE	POST FALLS	ID		83854	
5. Organized Under the Laws of:	6. Annual Re	6. Annual Report must be signed.*					
ID	Signature:	Signature: michael a. lee		Date: 12/12/2017			
W 45316	Name (typ	Name (type or print): michael a. lee			Title: member		
Processed 12/12/2017	* Electronical	* Electronically provided signatures are accepted as original signatures.					