

No. W 85356	Due no later than Jul 31, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. ALLISON CONSULTING AND TESTING, LLC NICK ALLISON 668 EAST 7TH NORTH REXBURG ID 83440-5122 USA		NICK ALLISON 668 EAST 7TH NORTH REXBURG ID 83440-5122			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	NICK ALLISON	668 EAST 7TH NORTH	REXBURG	ID	USA	83440-5122
5. Organized Under the Laws of: ID W 85356	6. Annual Report must be signed.* Signature: Nick Allison Name (type or print): Nick Allison		Date: 08/15/2017 Title: Manager			
Processed 08/15/2017		* Electronically provided signatures are accepted as original signatures.				