No. W 148543		Due no later than Mar 31, 2018			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. EDGE ITLLC SHAWN ROBERTS 2924 DORMAN AVE CALDWELL ID 83605		2924 DORMA CALDWELL I	SHAWN ROBERTS 2924 DORMAN AVE CALDWELL ID 83605 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	MEMBER SHAWN ROBERTS		2924 DORMAN AVE	CALDWELL	ID	USA	83605	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: shawn roberts			Date: 02/03/2018			
W 148543		Name (type or print): shawn roberts			Title: owner			
Processed 02/03/2018 * Electronically provided signatures are accepted as original signatures.								