No. W 171246		Due no later than Aug 31, 2017		2. Registered	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. 1042 STONEHENGE, LLC MARIA L PICONE 2976 E SHADOWVIEW ST EAGLE ID 83616		2976 E SHA	MARIA L PICONE 2976 E SHADOWVIEW ST EAGLE ID 83616 3. New Registered Agent Signature:*			
				3. <u>New</u> Registe				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MARIA L PIO		CONE	2976 E SHADOWVIEW ST	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Maria Picone			Date: 06/27/2017			
W 171246		Name (type	or print): Maria Picone		Title: Owner			
Processed 06/27/2017 * Electronically provided signatures are accepted as original signatures.								