No. **W 115422**	**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.** SISSON LLC TJ SISSON 4089 N 1800 E BUHL ID 83316	TJ SISSON INC 4089 N 1800 E BUHL ID 83316 3. New 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	TJ SISSON	4089 NORTH 1800 EAST	BUHL	ID	USA	83316

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 115422**	Signature: TJ Sisson Name (type or print): TJ Sisson	Date: 05/31/2017 Title: Manager

Processed 05/31/2017

* Electronically provided signatures are accepted as original signatures.