No. <b>W 125722</b>	Due no later than May 31, 2017		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			WADE GEISLER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  STRAIGHT EDGE AUTO RESTORATION LLC  WADE GEISLER  500 NORTH 2300 E			870 N 3RD E ST ANTHONY ID 83445			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			31 ANTHON				
	ST ANTHONY ID 83445		3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER JASON H SORENSEN		1826 TETONVIEW DR	REXBURG	ID	USA	83440	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID	Signature: Anahi Martinez			Date: 04/17/2017			
W 125722	Name (type or print): Anahi Martinez			Title: Bookkeeper			
Processed 04/17/2017	* Electronically provided signatures are accepted as original signatures.						