No. <b>W 42693</b> Return to:		Due no later than Sep 30, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  DORIAN PONDEAVORS LLC DON PON 825 FLIN WAY SUNNYVALE CA 94087		Registered Agent and Address (NO PO BOX)  TONY DROST     10673 W HALSTEAD LN STE 102     BOISE ID 83713  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DORIAN PONDEAVO DON PON 825 FLIN WAY						
NO FILING FEE IF RECEIVED BY DUE DATE							
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	
I MEMBER	DON PON AND BARBARA MAN PON FAMILY	825 FLIN WAY	SUNNYVALE	CA		94087	
5. Organized Under the Laws of:	6. Annual Report mus	. Annual Report must be signed.*					
ID	Signature: Don Por	Signature: Don Pon		Date: 07/29/2017			
W 42693	Name (type or prin	Name (type or print): Don Pon		Title: Member			
Processed 07/29/2017	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					