No. W 40405 Return to:			Due no later than Jun 30, 2016 Annual Report Form		Registered Agent and Address (NO PO BOX) ROBERT LARSON				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		LARSON PR ROBERT LA PO BOX 154	1. Mailing Address: Correct in this box if needed. LARSON PROPERTIES, LLC ROBERT LARSON PO BOX 1540 CALDWELL ID 83606		3913 PRESTON AVE. CALDWELL ID 83605-8360 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compar	nies: Enter	Names and Addre	sses of at least one Member or Manager.						
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
MANAGER	ROBERT	LARSON	3913 PRESTON AVE.		CALDWELL	ID		83605	
5. Organized Under the Laws of:		6. Annual Rep	6. Annual Report must be signed.*						
ID W 40405		Signature:	Signature: Robert Larson			Date: 04/25/2016			
		Name (type	Name (type or print): Robert Larson			Title: Manager			
Processed 04/25/2016 * Electronically provided signatures are accepted as original signatures.									