No. <b>W 83026</b>		Due no later than Apr 30, 2018		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			ROBERT CRANER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080					221 SOUTH 300 WEST SODA SPRINGS ID 83276  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	ROBERT L	CRANER	221 S 3RD W		SODA SPRINGS	ID	USA	83276-1560
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Robert L Craner			Date: 04/05/2018			
W 83026		Name (type or print): Robert L Craner			Title: MANAGER			
Processed 04/05/2018	Processed 04/05/2018 * Electronically provided signatures are accepted as original signatures.							