No. <b>W 94898</b>		Due no later than Jul 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  SAFARI INN, LLC PHILLIP MURELAGA 1070 GROVE BOISE ID 83702		PHILLIP MURELAGA 1070 GROVE BOISE ID 83702  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
<ol><li>Limited Liability Compa</li></ol>	anies: Enter Nar	nes and Addresses of at	least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER MEMBER	PHILLIP MUR BARBARA ST		1070 GROVE ST 1070 GROVE STREET	BOISE BOISE	ID ID	USA USA	83702 83702
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 94898		Signature: BARBARA STEIGER		Date: 05/31/2017			
		Name (type or print): BARBARA STEIGER		Title: GENERAL MANAGER			
Processed 05/31/2017		* Electronically provided	l signatures are accepted as original s	ignatures.			