No. W 82855		Due no later than Apr 30, 2016		2. Registered Ag	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. DEW LINE, LLC TIMOTHY P SPOONER 1485 TAMARACK CREEK RD ST MARIES ID 83861		1485 TAMAR ST MARIES	TIMOTHY P SPOONER 1485 TAMARACK CREEK RD ST MARIES ID 83861 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
Office Held	nies: Enter Nai Name	mes and Addresse	es of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code	
MANAGER MANAGER	SHANNON M TIMOTHY P		60 PONDEROSA LN 1485 TAMARACK CREEK RD	ST. MARIES ST. MARIES	ID ID	USA USA	83861 83861	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 82855		Signature: Tir Name (type o		Date: 03/26/2016 Title: Manager				
Processed 03/26/2016 * Electronically provided signatures are accepted as original signatures.								