

No. <b>W 166851</b>		Due no later than May 31, 2018 <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  ADVANCED RECOVERY SOLUTIONS L.L.C. NATHANIAL BAXTER PO BOX 104 SANDPOINT ID 83864		NATHANIAL BAXTER 3024 SAMUELS RD SANDPOINT ID 83864-8386			
				3. <u>New</u> Registered Agent Signature:*			
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	
MEMBER	NATHANIAL DION BAXTER	PO BOX 104	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:  <b>ID W 166851</b>		6. Annual Report must be signed.* Signature: Nathaniel Baxter Name (type or print): Nathaniel Baxter Date: 07/17/2018 Title: Owner/Operator					
Processed 07/17/2018		* Electronically provided signatures are accepted as original signatures.					