No. W 179668	Due no later than Mar 31, 2018		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		C T CORPORATION SYSTEM				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.			921 S ORCHARD ST STE G BOISE ID 83705			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SOLIDIFI TITLE & CLOSING, LLC 127 JOHN CLARKE ROAD MIDDLETOWN RI 02842 USA		BOISE ID 63				
			3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
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	
MANAGER JOHN NATHA	N CHANDLER	127 JOHN CLARKE ROAD	MIDDLETOWN	RI	USA	02842	
5. Organized Under the Laws of:	6. Annual Report m						
RI	Signature: Shanna Loness		Date: 02/16/2018				
W 179668	Name (type or print): Shanna Loness		Title: POA				
Processed 02/16/2018	* Electronically provided signatures are accepted as original signatures.						