| No. W 16208 | | Due no later than Aug 31, 2017 | 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. JOHN LEZAMIZ II LLC JOHN T LEZAMIZ 847 CANYON SPRINGS RD TWIN FALLS ID 83301 | JOHN LEZAMIZ 847 CANYON SPRINGS RD TWIN FALLS ID 83301 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4 Limited Liability Companies: 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 JOHN LEZAMIZ | | IIZ 847 CANYON SPRINGS RD | TWIN FALLS | ID | | 83301 | |
| 5. Organized Under the Laws of: ID W 16208 | | 6. Annual Report must be signed.* Signature: john t lezamiz Name (type or print): john t lezamiz | Date: 06/28/2017 Title: member | | | | |
| Processed 06/28/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | |