No. <b>W 119193</b>		Due no later than Nov 30, 2015		2	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.  WADS, LLC  133 E MAIN ST  REXBURG ID 83440			ZACH HILLMAN  133 E MAIN ST  REXBURG ID 83440  3. New Registered Agent Signature:*				
4. Limited Liability Compan	ies: Enter Nam	nes and Addresses of at	least one Member or Manager.						
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
	Casey Smith Zach Hillman		3946 DEER RIVER DR 133 E MAIN ST		IDAHO FALLS REXBRUG	ID ID	USA USA	83401 83440	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Zach Hillman			Date: 12/15/2015				
W 119193		Name (type or print): Zach Hillman			Title: Manager				
Processed 12/15/2015	* Electronically provided signatures are accepted as original signatures.								