No. W 126178		Due no later than Jun 30, 2018		2. Regis	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SABRINA PATRICK			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SABRINA PATRICK, LLC SABRINA D PATRICK 2463 HOMESTEAD ST TWIN FALLS ID 83301		TWI	2463 HOMESTEAD ST TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compar	nies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City		State	Country	Postal Code
MANAGER	SABRINA D	PATRICK	2463 HOMESTEAD ST	TWIN	FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Sabrina Patrick			Date: 07/20/2018			
W 126178		Name (type or print): Sabrina Patrick			Title: Manager			
Processed 07/20/2018 * Electronically provided signatures are accepted as original signatures.								