No. **W 7821**	**Due no later than Jan 31, 2016** **Annual Report Form**	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**	**1. Mailing Address: Correct in this box if needed.** CLINGER ENTERPRISES LLC GARTH L CLINGER 946 E 1450 N SHELLEY ID 83274	GARTH L CLINGER 946 E 1450 N SHELLEY ID 83274 3. New 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
MANAGER	GARTH L CLINGER	946 E 1450 N	SHELLEY	ID		83274
MANAGER	JOHN W CLINGER	2868 W 97 S	IDAHO FALLS	ID		83402

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 7821**	Signature: Garth Clinger	Date: 12/15/2015
	Name (type or print): Garth Clinger	Title: Manager

Processed 12/15/2015

* Electronically provided signatures are accepted as original signatures.