

No. <b>W 128027</b>	<b>Due no later than Aug 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> SAWTOOTH EMPLOYEE BENEFITS LLC PO BOX 928 BURLEY ID 83318		KYLE CARPENTER 1912 W MAIN ST BURLEY ID 83318			
			3. <u>New</u> 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
MEMBER	KYLE CARPENTER	1912 W MAIN	BURLEY	ID	USA	83318
5. Organized Under the Laws of:  <b>ID</b> <b>W 128027</b>	6. Annual Report must be signed.* Signature: Kyle Carpenter Name (type or print): Kyle Carpenter		Date: 06/21/2016 Title: President			
Processed 06/21/2016		* Electronically provided signatures are accepted as original signatures.				