No. W 151928		Due no later than May 31, 2017		2. Reg	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. ABODE PROPERTIES LLC CHENELE DIXON PO BOX 859 KIMBERLY ID 83341		343 KIM	CHENELE DIXON 3430 HARVEST MOON DRIVE KIMBERLY ID 83341 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
2000 002 10		mes and Addresse	es of at least one Member or Manager.	011				
Office Held	Name		Street or PO Address	City		State	Country	Postal Code
MEMBER	MICHAEL PA	AUL DIXON	3430 HARVEST MOON DR.	KIMB	BERLY	ID	USA	83341
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Chenele Dixon			Date: 06/01/2017			
W 151928		Name (type or print): Chenele Dixon			Title: Owner			
Processed 06/01/2017 * Electronically provided signatures are accepted as original signatures.								