No. W 186987		Due no later than Jul 31, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		N 000 1000 1000 1000 100 100 100	CONNOR ORION MACLEOD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CASCADIA FIREARMS, LLC CONNOR ORION MACLEOD PO BOX 591 TROY ID 83871		TROY ID	1040 HILL RD TROY ID 83871-8387 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER CONNOR MACLEOI		ACLEOD	1040 HILL RD. PO BOX 591	TROY	ID	USA	83871	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Co	onnor Orion Macleod		Date: 05/28/2018			
W 186987		Name (type o	r print): Connor Orion Macleod		Title: Managing Member			
Processed 05/28/2018 * Electronically provided signatures are accepted as original signatures.								