

No. <b>W 147289</b>		<b>Due no later than Feb 29, 2016</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  COCHRAN ENTERPRISES LLC 3030 S MAIN ST MOUNTAIN HOME ID 83647		KRISTA COCHRAN 3030 S MAIN ST MOUNTAIN HOME ID 83647	
				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	KRISTA COCHRAN	3030 S MAIN STREEET	MOUNTAIN HOME	ID	USA 83647
5. Organized Under the Laws of:  <b>ID W 147289</b>		6. Annual Report must be signed.* Signature: Krista Cochran Name (type or print): Krista Cochran Date: 03/22/2016 Title: Member			
Processed 03/22/2016		* Electronically provided signatures are accepted as original signatures.			