No. W 12385 Return to:		Due no later than Jul 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. LODGE, LLC MICHAEL N FERY 350 N 9TH ST STE 200 BOISE ID 83702		2	2. Registered Agent and Address (NO PO BOX) MIKE FERY 350 N 9TH ST STE 200 BOISE ID 83702 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				3				
4. Limited Liability Compa	anies: Enter Na	mes and Addresses of at least	one Member or Manager.					
Office Held	Name	Stre	et or PO Address		City	State	Country	Postal Code
MANAGER	MIKE FERY	350	N 9TH ST STE 200		BOISE	ID		83702
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 12385		Signature: Brittany Malespin			Date: 05/25/2016			
		Name (type or print): Brittany Malespin			Title: Assistant			
Processed 05/25/2016 * Electronically provided signatures are accepted as original signatures.								