

No. <b>W 160353</b>	<b>Due no later than Jan 31, 2018</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> ACL ENTERPRISES, LLC ANDREW LEESE 604 S RIVERSIDE HARBOR DR POST FALLS ID 83854 USA		ANDREW LEESE 604 S RIVERSIDE HARBOR DR POST FALLS ID 83854-8385			
			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
MANAGER	ANDREW LEESE	604	POST FALLS	ID	USA	83854
5. Organized Under the Laws of:  <b>ID</b> <b>W 160353</b>	6. Annual Report must be signed.* Signature: Andrew Leese Name (type or print): Andrew Leese		Date: 12/23/2017 Title: Manager			
Processed 12/23/2017		* Electronically provided signatures are accepted as original signatures.				