| No. W 113493 | | Due no later than Apr 30, 2017 | 2. Registered A | 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. CDB HOSPITALITY, LLC KENT CLAUSEN 8923 E MISSION #135 SPOKANE WA 99212 | 2100 NORTH COEUR D AL | CHARLES NIPP 2100 NORTHWEST BLVD STE 350 COEUR D ALENE ID 83814 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Fotor Nar | | mes and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER KENT CLAUSEN | | SEN 8923 E. MISSION SUITE 135 | SPOKANE | WA | USA | 99212 | |
| 5. Organized Under the Laws of: WA W 113493 | | 6. Annual Report must be signed.* Signature: Kent Clausen Name (type or print): Kent Clausen | Date: 02/20/2017 Title: Manager | | | | |
| * Electronically provided signatures are accepted as original signatures. | | | | | | | |