

No. W 50123	Due no later than May 31, 2016 Annual Report Form	2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SHOEMAKER ENTERPRISES, LLC CRAIG F. SHOEMAKER 5406 TRIPPLE CT NAMPA ID 83687	CRAIG F SHOEMAKER 5406 TRIPPLE CT NAMPA ID 83687	
		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	ROBERT S SHOEMAKER JR	885 SOUTH TRANQUIL LANE	EAGLE ID 83616
MEMBER	CRAIG F SHOEMAKER	5406 TRIPPLE CT	NAMPA ID 83687
5. Organized Under the Laws of: ID W 50123	6. Annual Report must be signed.* Signature: Craig Shoemaker Name (type or print): Craig Shoemaker		Date: 03/28/2016 Title: Member
Processed 03/28/2016		* Electronically provided signatures are accepted as original signatures.	