No. <b>W 175089</b>		Due no later than Dec 31, 2017		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.  KLACKING CREEK NATURALS, LLC TAMMY BELL 3421 E MOUNTAINVIEW DR POST FALLS ID 83854		TAMMY BELL 3421 E MOUNTAINVIEW DR POST FALLS ID 83854				
					3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	MANAGER TAMMY L BELL		3421 E MOUNTAINVIEW DR		POST FALLS	ID	USA	83854
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: TAMMY L BELL			Date: 01/01/2018			
W 175089		Name (type or print): TAMMY L BELL			Title: MANAGER			
Processed 01/01/2018 * Electronically provided signatures are accepted as original signatures.								