No. W 169891		Due no later than Aug 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. 400 W OFARRELL LLC 1020 N 17TH ST BOISE ID 83702		2. Registered	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				404 S 8TH BOISE ID	MATTHEW SWANK 404 S 8TH ST SUITE 202 BOISE ID 83702 3. New Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							Doctol Code	
Office Held MEMBER	Name MATTHEW 9	SWANK	Street or PO Address 1020 N 17TH STREET	City BOISE	State ID	Country USA	Postal Code 83702	
MEMBER	PIATTIEW S	JVVAIVIX	1020 N 17111 STREET	DOIDE	ID.	OSA	03702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: matthew:	Date: 07/06/2017					
W 169891		Name (type or print):		Title: principal				
Processed 07/06/2017 * Electronically provided signatures are accepted as original signatures.								