No. **W 103467**	**Due no later than May 31, 2018** **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.** FISH INN CAMP LLC CARLA J LARSEN PO BOX 98 KOOSKIA ID 83539	JENNIFER KONRAD 148 CASHWAY RD KAMIAH ID 83536 3. New 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	CARLA J LARSEN	PO BOX 98	KOOSKIA	ID	USA	83539

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 103467**	Signature: Carla J. Larsen	Date: 03/22/2018
	Name (type or print): Carla J. Larsen	Title: Manager

Processed 03/22/2018

* Electronically provided signatures are accepted as original signatures.