

No. W 15488		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		1. Mailing Address: Correct in this box if needed. CONCEPTUAL IMPACT L.L.C. NICK ST JOHN 4566 S SILVERMAPLE PLACE BOISE ID 83709		NICK ST JOHN 4566 S SILVERMAPLE PLACE BOISE ID 83709			
NO FILING FEE IF RECEIVED BY DUE DATE				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	NICK ST JOHN	4566 S SILVERMAPLE PLACE	BOISE	ID	83709		
MEMBER	CYNTHIA ST JOHN	4566 S SILVERMAPLE PLACE	BOISE	ID	83709		
5. Organized Under the Laws of: ID W 15488		6. Annual Report must be signed.* Signature: Nick StJohn Name (type or print): Nick StJohn Date: 05/03/2018 Title: Owner					
Processed 05/03/2018 * Electronically provided signatures are accepted as original signatures.							