No. <b>W 74293</b>		Due no later than May 31, 2018		2	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		Annual Report Form  1. Mailing Address: Correct in this box if needed.  SCAFE'S FALL RIVER RANCH, LLC  NATHAN SCAFE  1012 GRAINVILLE RD  ASHTON ID 83420  mes and Addresses of at least one Member or Manager.			NATHAN SCAFE 1012 GRAINVILLE RD ASHTON ID 83420  3. New Registered Agent Signature:*			
200 200	Name		or PO Address		City	State	Country	Postal Code
MANAGER	NATHAN SC KRISTEN SC	AFE 1012 G	RAINVILLE RD RAINVILLE RD		ASHTON ASHTON	ID ID	,	83420 83420
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Nathan Scafe			Date: 05/31/2018			
W 74293		Name (type or print): Nathan Scafe			Title: Manager			
Processed 05/31/2018 * Electronically provided signatures are accepted as original signatures.								