No. W 178786 Return to:		Due no later than Feb 28, 2018 Annual Report Form	-	2. Registered Agent and Address (NO PO BOX) SAMUEL J MINKER				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needo TEASANE, LLC 617 CHURCH ST SANDPOINT ID 83864	SA	617 CHURCH ST SANDPOINT ID 83864 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE				<u>w</u> Registere	ed Agent Si	gnature.		
4. Limited Liability Com	ipanies: Enter Nai	mes and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City		State	Country	Postal Code	
MANAGER	SAM J MINI	KER 617 CHURCH ST	SAN	IDPOINT	ID	USA	83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Sam Minker		Date: 04/03/2018				
W 178786		Name (type or print): Sam Minker		Title: Owner				
Processed 04/03/2018 * Electronically provided signatures are accepted as original signatures.								