No. W 7705		Due no later than Jan 31, 2018		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		AND	C T CORPORATION SYSTEM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing A AUTUMN COV DAVID N JOH PO BOX 50497 IDAHO FALLS	BOISE ID 83	921 S ORCHARD ST STE G BOISE ID 83705-8344 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Com	panies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	DAVID N JOHNSON		PO BOX 50497	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: David Johnson			Date: 12/22/2017			
W 7705		Name (type o		Title: Member				
Processed 12/22/2017 * Electronically provided signatures are accepted as original signatures.								