No. W 60887		Due no later than Mar 31, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form			SUSAN SCHAFFNER			
		1. Mailing Address: Correct in this box if needed. SUSAN SCHAFFNER REAL ESTATE LLC SUSAN SCHAFFNER 909 MAIN ST SALMON ID 83467			909 MAIN ST SALMON ID 83467 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		5/1 <u>2</u> 1.611 12						
4. Limited Liability Companies:	: Enter Nar	nes and Addresse	s of at least one Member or Manager.					
Office Held Na	ime		Street or PO Address		City	State	Country	Postal Code
	SUSAN SCHAFFNER HENRY E SCHAFFNER		909 MAIN ST 909 MAIN ST		SALMON SALMON	ID ID		83467 83467
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 60887		Signature: C.A. Bloodgood			Date: 02/01/2017			
		Name (type or print): C.A. Bloodgood			Title: Accountant			
Processed 02/01/2017	* Electronically provided signatures are accepted as original signatures.							