

No. W 36531		Due no later than Feb 28, 2017 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. QUAIL, L.L.C. BOYD R. WILKES 10909 QUAIL COVE CT. NAMPA ID 83687		BOYD R WILKES 10909 QUAIL COVE CT NAMPA ID 83687			
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 MANAGER	Name BOYD R WILKES	Street or PO Address 10909 QUAIL COVE CT.		City NAMPA	State ID	Country	Postal Code 83687
5. Organized Under the Laws of: ID W 36531		6. Annual Report must be signed.* Signature: Boyd R Wilkes Name (type or print): Boyd R Wilkes Date: 12/31/2016 Title: manager					
Processed 12/31/2016 * Electronically provided signatures are accepted as original signatures.							