

No. W 175136	Due no later than Dec 31, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TIMBER TOWN WICKS LLC KATHLEEN M WILSON PO BOX 544 CASCADE ID 83611	KATHLEEN M WILSON 511 SKYLINE DRIVE CASCADE ID 83611				
		3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	KATHLEEN MARIE WILSON	511 SKYLINE DRIVE	CASCADE	ID	USA	83611
5. Organized Under the Laws of: ID W 175136	6. Annual Report must be signed.* Signature: Kathleen M. Wilson Name (type or print): Kathleen M. Wilson		Date: 12/29/2017 Title: Owner			
Processed 12/29/2017		* Electronically provided signatures are accepted as original signatures.				