No. <b>W 76377</b>	Due no later than Jul 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form		MARLENE F MAGERS				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  FO COMPANY, LLC  MARLENE F. MAGERS  POST OFFICE BOX 1323  POST FALLS ID 83877			6271 W HARBOR DR COEUR D'ALENE ID 83814			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
			3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	lames and Addresses	of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MARLENE	F. MAGERS	6271 WEST HARBOR DRIVE	COEUR D' ALENE	ID	USA	83814	
MEMBER WILLIAM (	G. S	6271 WEST HARBOR DRIVE	COEUR D' ALENE	ID	USA	83814	
5. Organized Under the Laws of:	6. Annual Report	6. Annual Report must be signed.*					
<b>ID</b> Signature		Narlene F. Magers		Date: 07/23/2017			
W 76377	Name (type or print): Marlene F. Magers			Title: Owner			
Processed 07/23/2017	* Electronically pro	* Electronically provided signatures are accepted as original signatures.					