

No. W 145454		Due no later than Dec 31, 2016 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. JABBOUR 524 WEST C STREET, LLC 315 S ALMON STREET MOSCOW ID 83843		CADE KONEN 315 S ALMON STREET MOSCOW ID 83843			
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 MEMBER	Name JULIE JABBORA	Street or PO Address PO BOX 93741		City LAS VEGAS	State NV	Country USA	Postal Code 89193
5. Organized Under the Laws of: ID W 145454		6. Annual Report must be signed.* Signature: cade konen Name (type or print): cade konen Date: 10/31/2016 Title: registered agent					
Processed 10/31/2016 * Electronically provided signatures are accepted as original signatures.							