No. W 56973		Due no later than Dec 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CHARLENE K QUADE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		1. Mailing Address: Correct in this box if needed. C.K. QUADE LAW, PLLC CHARLENE K QUADE 600 EAST RIVERPARK LANE SUITE 215 BOISE ID 83706 mes and Addresses of at least one Member or Manager.		600 EAST RIVERPARK LN SUITE 215 BOISE ID 83706-8371 3. New Registered Agent Signature:*			
Office Held	Name	nes and Addresses o	Street or PO Address	City	State	Country	Postal Code
MANAGER	CHARLENE K QUADE		4802 EAST ARROW JUNCTION DRIVE	BOISE	ID	······································	83716
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 56973		Signature: Charlene K. Quade		Date: 12/01/2016			
		Name (type or pr	Title: Manager/Member				
Processed 12/01/2016		* Electronically provi	ded signatures are accepted as original sign	atures.	_		_