No. W 58367		Due no later than Jan 31, 2018 2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form	to receive the second residence	TODD BLASS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 1. Mailing Ad RECTANGLE, L.I TODD BLASS PO BOX 486		S	TWIN FALLS	163 4TH AVE N TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER BLASS INC MEMBER GERALD I MEMBER KEN STU	MARTENS	PO BOX 486 621 N. COLLEGE RD, SUITE 100 PO BOX JJ	TWIN FALLS TWIN FALLS TWIN FALLS	ID ID ID	USA USA	83303-0486 83301 83303	
5. Organized Under the Laws of: 6. Annual Repor		ort must be signed.*					
ID Signature:		Todd Blass Date: 11/27/2017					
W 58367	Name (type	or print): R Todd Blass	Title: Member				
Processed 11/27/2017	* Electronically provided signatures are accepted as original signatures.						