

No. <b>W 58186</b>		<b>Due no later than Jan 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ARNIE, LLC MYRNA LOWRANCE 826 W 4TH ST KUNA ID 83634		MYRNA LOWRANCE 826 W 4TH ST KUNA ID 83634			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
MANAGER	MYRNA LOWRANCE	826 W 4TH ST	KUNA	ID	83634		
MANAGER	JAY LOWRANCE	826 W 4TH ST	KUNA	ID	83634		
MANAGER	GREGORY T LOWRANCE	826 W. 4TH STREET	KUNA	ID	USA	83634	
5. Organized Under the Laws of:  <b>ID</b> <b>W 58186</b>		6. Annual Report must be signed.*  Signature: MYRNA LOWRANCE Name (type or print): MYRNA LOWRANCE					
		Date: 12/12/2015 Title: MANAGER					
Processed 12/12/2015      * Electronically provided signatures are accepted as original signatures.							