No. <b>W 161653</b>		Due no later than Feb 28, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  NEASE FAMILY SERVICES, LLC 10035 W LITTLEWOOD ST BOISE ID 83709		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF				10035 W LI BOISE ID	COREY LEE NEASE 10035 W LITTLEWOOD ST BOISE ID 83709  3. New Registered Agent Signature:*			
4. Limited Liability Com		mes and Addresses of at least one N	Member or Manager.					
Office Held	Name		PO Address	City	State	Country	Postal Code	
MEMBER COREY NEAS		SE 10035 W	LITTLEWOOD ST	BOISE	ID	USA	83709	
5. Organized Under the Laws of:  ID  W 161653		6. Annual Report must be signed.* Signature: Corey Nease Name (type or print): Corey Nea	Date: 12/21/2016 Title: Co-Owner					
Processed 12/21/2016		* Electronically provided signatures are accepted as original signatures.						