No. <b>W 14886</b>	D	Due no later than Mar 31, 2016 Annual Report Form  1. Mailing Address: Correct in this box if needed.  DMD INVESTMENTS LLC JULENE DAUGHERTY PO BOX 328 ADRIAN OR 97901-0328		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DMD INVEST JULENE DAU PO BOX 328			TERRY DAUGHERTY 111 S ROSWELL BLVD PARMA ID 83660  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Address	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	DAUGHERTY AUGHERTY	PO BOX 154 111 S ROSWELL BLVD	ADRIAN PARMA	OR ID		97901-0328 83660	
5. Organized Under the Laws of: 6. Annual Repor		ort must be signed.*					
OR Signa		Signature: Julene Daugherty Date: 01/20/2016					
W 14886	Name (type	or print): Julene Daugherty		Title: Office Manager			
Processed 01/20/2016	* Electronically	* Electronically provided signatures are accepted as original signatures.					