

No. W 164262	Due no later than Mar 31, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. OP-ALS PROPERTIES,LLC. PATRICIA WILSON 24447 S WHALEN RD SAINT MARIES ID 83861-1001		PATRICIA WILSON 24447 S WHALEN RD SAINT MARIES ID 83861-1001				
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name PATRICIA G WILSON	Street or PO Address 24447 S. WHALEN RD	City ST. MARIES	State ID	Country USA	Postal Code 83861-1001	
5. Organized Under the Laws of: ID W 164262	6. Annual Report must be signed.* Signature: Patricia Wilson Name (type or print): Patricia Wilson						Date: 01/22/2017 Title: GM
Processed 01/22/2017	* Electronically provided signatures are accepted as original signatures.						