

No. W 173668		Due no later than Nov 30, 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. 1111 CALDWELL, LLC MICHAEL R LARSON 459 W MAIN STREET P.O. BOX 905 KUNA ID 83634 USA		COREY J RIPPEE 459 W MAIN STREET KUNA ID 83634-8363			
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 MICHAEL LARSON	Street or PO Address 459 W MAIN ST		City KUNA	State ID	Country USA	Postal Code 83634
5. Organized Under the Laws of: ID W 173668		6. Annual Report must be signed.* Signature: Michael Larson Name (type or print): Michael Larson Date: 12/18/2017 Title: Managing Member					
Processed 12/18/2017 * Electronically provided signatures are accepted as original signatures.							