No. <b>C 62527</b>		Due no later than Nov 30, 2016 Annual Report Form  1. Mailing Address: Correct in this box if needed.  NELSEN ENTERPRISES, INC. THERON NELSEN PO BOX 272 LIBERTY LAKE WA 99019		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 RECEIVED BY DUE DATE				D JOHN THORNTON 3101 W MAIN STE 200 BOISE ID 83702-7067  3. New Registered Agent Signature:*				
								4. Corporations: Enter Nam
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
	THERON NELSEN DARLENE NELSEN		PO BOX 272 PO BOX 272		LIBERTY LAKE LIBERTY LAKE	WA WA	USA USA	99019 99019
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Theron Nelsen			Date: 11/17/2016			
C 62527		Name (type or print): Theron Nelsen			Title: President			
Processed 11/17/2016 * Electronically provided signatures are accepted as original signatures.								