

Aug. 3, 2017 2:43PM No. W 141310		Secretary of State DUE NO LATER THAN Aug 31, 2017 Annual Report Form	No. 5421 P. 1 2. Registered Agent (NOT A P.O. BOX)
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. FULL DRAW CONSTRUCTION, LLC FRANK ROGERS 3620 STONEHAVEN DR IDAHO FALLS ID 83406		FRANK ROGERS 3620 STONEHAVEN DR IDAHO FALLS ID 83406
NO FILING FEE IF RECEIVED BY DUE DATE			3. New Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member	Name	Street or PO Address	City State Country Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Frank Rogers	3620 Stonehaven Dr	Idaho Falls Id 83406
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:  IDAHO W 141310		6. Signature: <u>Frank Rogers</u> Date: <u>8-4-17</u> Name (type or print): <u>Frank Rogers</u> Title: <u>Manager</u>	
Issued 08/03/2017 by SLD 102076			

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM