No. C 91952	Due no later than Apr 30, 2016 Annual Report Form 2. Registered Agent and Office (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. B BAR B, INC. KATHERINE B. BRECKENRIDGE 762 ROBERT ST PICABO ID 83348 KATHERINE B. BRECKENRIDGE
NO FILING FEE IF RECEIVED BY DUE DATE	3. <u>New</u> Registered Agent Signature.
Office Held	r Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. Name Street or PO Address City State Country Postal Code
POESI NENT	KANAGRIJE BOX 685 PRADO ID. USA 83348
sa/ME. Re	SAUNTONS
5. Organized Under the La	
IDAHO C 91952	Signature: Little Fuellis Ends Name (type or print): KALKERNE B. BREKENNI POE Title: Title: THE DENT
Issued 02/22/2016 by TLB	116621

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM