No. W 127828		Due no later than Aug 31, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JOHN F VAN ENGELEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. DR. HANOWELL PLLC JONATHAN HANOWELL PO BOX 2775 TWIN FALLS ID 83303		• •	1150 EASTLAND DR N TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	Cit	У	State	Country	Postal Code
MEMBER JONATHAN		HANOWELL	4123 HIDDEN LAKES DR	KIN	MBERLY	ID	USA	83341
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: John Van Engelen			Date: 06/29/2017			
W 127828		Name (type or print): John Van Engelen			Title: CPA			
Processed 06/29/2017 * Electronically provided signatures are accepted as original signatures.								