No. <b>W 172305</b>		Due no later than Sep 30, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  4 F LLC 7009 S MARBLE CIRCLE IDAHO FALLS ID 83406		2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				JAMES BOONE 7009 S MARBLE CIRCLE IDAHO FALLS ID 83406-8340  3. New Registered Agent Signature:*				
RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Address	es of at least one Member or Manag	er.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	JAMES B BO	OONE	7009		IDAHO FALLS	ID	USA	83406
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: James Boone		Date: 08/22/2017				
W 172305		Name (type or print): James Boone			Title: registered agent			
Processed 08/22/2017		Electronically provided signatures are accepted as original signatures.						