No. W 147445		Due no later than Feb 29, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SHIRLEY RAMSOWER 30733 HOWE RD PARMA ID 83660			
SECRETARY OF STATE		1. Mailing Address: Correct in this box if needed.		d.				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		RAMSOWER LLC CHARLES M RAMSOWER 787 GRAND AVE						
		NYSSA OR 97913 USA			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER MEMBER	CHARLES M RAMSOWER SUSAN M RAMSOWER		787 GRAND AVE 787 GRAND AVE		NYSSA NYSSA	OR OR	USA USA	97913 97913
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 147445		Signature: Charles M Ramsower			Date: 12/30/2015			
		Name (type or print): Charles M Ramsower			Title: Member			
Processed 12/30/2015	* Electronically provided signatures are accepted as original signatures.							