

No. W 115227	Due no later than Jun 30, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) PAM THOMAS 995 HAAS RD WEISER ID 83672																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. P/T PROPERTY RENTAL MGMT LLC PAMELA S THOMAS PO BOX 428 615 E COMMERCIAL <i>995 Haas Rd</i> WEISER ID 83672		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%; text-align: left;">Manager or Member</th> <th style="width: 25%; text-align: left;">Name</th> <th style="width: 25%; text-align: left;">Street or PO Address</th> <th style="width: 10%; text-align: left;">City</th> <th style="width: 10%; text-align: left;">State</th> <th style="width: 10%; text-align: left;">Country</th> <th style="width: 5%; text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Pam Thomas</td> <td>995 Haas Rd</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <div style="text-align: right; margin-top: -20px; margin-right: 20px;"> <i>Weiser ID 83672</i> </div>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Pam Thomas	995 Haas Rd					Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>							Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>							Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 115227 </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <i>Pam Thomas</i> </td> <td style="width: 40%;"> Date: <i>7-18-16</i> </td> </tr> <tr> <td> Name (type or print): <i>Pam Thomas</i> </td> <td> Title: <i>owner</i> </td> </tr> </table>		Signature: <i>Pam Thomas</i>	Date: <i>7-18-16</i>	Name (type or print): <i>Pam Thomas</i>	Title: <i>owner</i>																															
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