

|                                                                                                                                                        |                 |                                                                                                                                                        |               |                                                                   |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 61687</b>                                                                                                                                     |                 | <b>Due no later than Apr 30, 2017</b>                                                                                                                  |               | 2. Registered Agent and Address <b>(NO PO BOX)</b>                |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>BUSH FAMILY, LLC<br>GERTRUDE G BUSH<br>1165 S BLUE CREEK RD<br>COEUR D'ALENE ID 83814 |               | GERTRUDE G BUSH<br>1165 S BLUE CREEK RD<br>COEUR D'ALENE ID 83814 |         |                  |  |
|                                                                                                                                                        |                 |                                                                                                                                                        |               | 3. <u>New</u> Registered Agent Signature:*                        |         |                  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                 |                                                                                                                                                        |               |                                                                   |         |                  |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                   | City          | State                                                             | Country | Postal Code      |  |
| MANAGER                                                                                                                                                | GERTRUDE G BUSH | 1165 S BLUE CREEK RD                                                                                                                                   | COEUR D'ALENE | ID                                                                | USA     | 83814            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                                      |               |                                                                   |         |                  |  |
| <b>ID<br/>W 61687</b>                                                                                                                                  |                 | Signature: Gertrude G. Bush                                                                                                                            |               |                                                                   |         | Date: 03/22/2017 |  |
|                                                                                                                                                        |                 | Name (type or print): Gertrude G. Bush                                                                                                                 |               |                                                                   |         | Title: Manager   |  |
| Processed 03/22/2017                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                              |               |                                                                   |         |                  |  |