

No. W 151989		Due no later than May 31, 2016		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. BEN JOHNSTON CPA, PLLC BEN JOHNSTON 1701 JOHNSON RD COEUR D ALENE ID 83814		BEN JOHNSTON 1701 JOHNSON RD 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
MEMBER	BENJAMIN JAMES JOHNSTON	1701 JOHNSON RD	COEUR D ALENE	ID	USA 83814
5. Organized Under the Laws of: ID W 151989		6. Annual Report must be signed.* Signature: Ben Johnston Name (type or print): Ben Johnston Date: 06/30/2016 Title: Officer			
Processed 06/30/2016		* Electronically provided signatures are accepted as original signatures.			