No. W 151522	Due no later than May 31, 2017	2. Registered Agent and Office (NOT A P.O. BOX)
Return to:	Annual Report Form	TRAVIS BARNHART
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	-511 E TRAIL CREEK DR
450 N 4th STREET PO BOX 83720	208 VINYL FENCE LLC	NAMPA ID 83686 5487 N. Bach fre
BOISE, ID 83720-0080	511 E TRAIL CREEK DX MAMPA ID 83686	1548/N. BACK 11
		Jundian Ly 83644
	5487 N. Beich Ave Meridian ID 93646	3. New Registered Agent Signature.
NO FILING FEE IF RECEIVED BY DUE	Meridian ID 93646	or trant tradition of the organization
DATE		
4. Limited Liability	Companies: Enter Names and Addresses of Manage	ers OR Members. See Instructions.
Manager or Member	Name Street or PO Address City	
Manager Member	Travis Barnhart 5487 N. Bouch Ave.	3646 SD US 83646
Manager Member M		
Manager Member		
Manager   Member		
5. Organized Under the Lav	ws of: 6. 0	
TDALLO	Signature:	Date:
IDAHO		04-27-17
W 151522	Name (type or print):	Title:
	Traves Bambart	Mass.

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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