No. W 169420		D	Due no later than Jul 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		Name of Street, and the Street	SHELLEY WALLACE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. 5776 LILYBROOK, L.L.C. SHELLEY WALLACE 565 N WHITE SAGE WAY EAGLE ID 83616		EAGLE ID	565 N WHITE SAGE WAY EAGLE ID 83616 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter N	lames and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	SHELLEY \	VALLACE	565 N WHITE SAGE WAY	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: S		Date: 05/21/2018				
W 169420		Name (type o	or print): Shelley Wallace		Title: Manager			
Processed 05/21/2018 * Electronically provided signatures are accepted as original signatures.								