

No. <b>W 11107</b>		<b>Due no later than Feb 28, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  KNIPE JANOUSH KNIPE, LLC BRADFORD T KNIPE 1661 W. SHORELINE DRIVE SUITE 200 BOISE ID 83702		BRADFORD T KNIPE 1661 W. SHORELINE DRIVE STE 200 BOISE ID 83702			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	KNIPE CORP.	1661 W. SHORELINE DRIVE STE. 200	BOISE	ID	USA	83702	
MEMBER	NORTHWEST APPRAISAL AND CONSULTING, INC.	1661 W. SHORELINE DRIVE STE. 200	BOISE	ID	USA	83702	
MEMBER	DMS ENTERPRISES, INC.	1661 W. SHORELINE DRIVE STE. 200	BOISE	ID	USA	83702	
5. Organized Under the Laws of:  <b>ID</b> <b>W 11107</b>		6. Annual Report must be signed.*  Signature: Bradford T. Knipe Name (type or print): Bradford T. Knipe					
		Date: 12/27/2016 Title: Managing Member					
Processed 12/27/2016 * Electronically provided signatures are accepted as original signatures.							