

No. <b>W 104360</b>	<b>Due no later than Jun 30, 2016</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> MULLAN HOUSE, LLC KEVIN C FRAME 4392 W SELTICE WAY POST FALLS ID 83854		KEVIN C FRAME 4392 W SELTICE WAY POST FALLS ID 83854			
			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	KEVIN CARL FRAME	1318 LOST SPRINGS RANCH RD	POST FALLS	ID	USA	83854
5. Organized Under the Laws of:  <b>ID</b> <b>W 104360</b>		6. Annual Report must be signed.* Signature: Sharon Stagner Name (type or print): Sharon Stagner		Date: 04/29/2016 Title: Bookkeeper		
Processed 04/29/2016		* Electronically provided signatures are accepted as original signatures.				