No. W 57695		Due no later than Jan 31, 2016		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. IMPERIAL TAXIDERMY, LLC MICHEL S SANCHOTENA 11305 W HAWKINS AVE		11305 W. H NAMPA ID	MICHEL S SANCHOTENA 11305 W. HAWKINS AVE. NAMPA ID 83651			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		NAMPA ID 836		3. <u>New</u> Registe	ered Agent S	ignature:*		
Office Held	Name	nes and made esses t	Street or PO Address	City	State	Country	Postal Code	
MANAGER MANAGER	MICHEL S SANCHOTENA SHIRLEY E. SANCHOTENA		11305 W. HAWKINS AVE. 11305 W. HAWKINS AVE.	NAMPA NAMPA	ID ID		83651 83651	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 57695		Signature: Shirley E. Sanchotena Date: 11/16/2015					5	
		Name (type or p		Title: Manager				
Processed 11/16/2015	rocessed 11/16/2015 * Electronically provided signatures are accepted as original signatures.							