



No. W 41292	Due no later than Jul 31, 2018 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MARK A CECI 10395 S DEMPSEY CR RD LAVA HOT SPRINGS ID 83246
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MOUNTAIN PARADISE TRUCKING, LLC MARK A CECI PO BOX 81 LAVA HOT SPRINGS ID 83246 USA		3. <u>New</u> Registered Agent Signature. 
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> MARK CECI PO Box 81 LAVA HOT SPRINGS ID 83246 <small style="margin-left: 350px;">USA</small>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 41292 </div>		6. Signature:  <hr/> Name (type or print): <u>MARK A CECI</u> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Date: <u>5/25/18</u> Title: <u>OWNER</u> </div> </div>	

Issued 05/21/2018 by TAH

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM