

No. W 178880	Due no later than Feb 28, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		SANDRA SPREIER 1166 N COLE RD STE C BOISE ID 83704-8370			
	BOISE'S BEST INSURANCE, LLC SANDRA SPREIER 1166 N COLE RD STE C BOISE ID 83704		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	SANDRA SPREIER	1166	BOISE	ID	USA	83704
5. Organized Under the Laws of: ID W 178880		6. Annual Report must be signed.* Signature: Sandra Spreier Name (type or print): Sandra Spreier		Date: 01/01/2018 Title: owner		
Processed 01/01/2018		* Electronically provided signatures are accepted as original signatures.				