

No. W 140957		Due no later than Aug 31, 2018		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. FIREHOUSE MEDICS LLC RANDALL M ARNOLD PO BOX 2111 LEWISTON ID 83501		RANDALL M ARNOLD 331 STEWART AVE. LEWISTON ID 83501	
				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	RANDALL MASON ARNOLD	331 STEWART AVE.	LEWISTON	ID	USA 83501
5. Organized Under the Laws of: ID W 140957		6. Annual Report must be signed.* Signature: Randall Arnold Name (type or print): Randall Arnold Date: 06/23/2018 Title: Owner			
Processed 06/23/2018		* Electronically provided signatures are accepted as original signatures.			