

No. W 52314		Due no later than Jul 31, 2016 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		1. Mailing Address: Correct in this box if needed. MIXED DOUBLES, LLC MICHAEL J SWOPE 2244 S SWALLOWTAIL BOISE ID 83706		MICHAEL J SWOPE 2244 S SWALLOWTAIL BOISE ID 83706			
NO FILING FEE IF RECEIVED BY DUE DATE				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	MICHAEL J SWOPE	2244 SWALLOWTAIL	BOISE	ID	83706		
MEMBER	MARY J SWOPE	2244 SWALLOWTAIL	BOISE	ID	USA	83706	
5. Organized Under the Laws of: ID W 52314		6. Annual Report must be signed.* Signature: Michael J Swope Name (type or print): Michael J Swope					
		Date: 05/28/2016 Title: Manager					
Processed 05/28/2016		* Electronically provided signatures are accepted as original signatures.					