No. W 15243		Due no later than May 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. MAPLE STREET LAUNDRY, LLC CHARLELE DEWEY 66 N MAPLE BLACKFOOT ID 83221		2. Registered Agent and Address (NO PO BOX) CHARLENE DEWEY 66 N MAPLE BLACKFOOT ID 83221 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MAPLE ST CHARLELE						
NO FILING FEE IF RECEIVED BY DUE DAT	E						
200 80 0		esses of at least one Member or Manager.					
Office Held Nan		Street or PO Address	City	State	Country	Postal Code	
	CE MICKELSEN RLENE DEWEY	45 N 350 W 45 N 350 W	BLACKFOOT BLACKFOOT	ID ID		83221 83221	
5. Organized Under the Laws of	of: 6. Annual Re	6. Annual Report must be signed.*					
ID	Signature	Signature: CHARLENE MICKLESEN Date: 05/19/2016					
W 15243	Name (typ	Name (type or print): CHARLENE MICKLESEN Title: MEMBER					
Processed 05/19/2016	* Electronical	* Electronically provided signatures are accepted as original signatures.					