

No. W 112458	Due no later than Mar 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SAFE LLC ROBERT SMITH, MANAGER PO BOX 864 POST FALLS ID 83877		AUGUST FAWKES 741 KENTUCKY AVE HAYDEN ID 83835			
			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	ROBERT B SMITH	PO BOX 864	POST FALLS	ID	USA	83877
5. Organized Under the Laws of: ID W 112458		6. Annual Report must be signed.* Signature: Robert B. Smith Name (type or print): Robert B. Smith		Date: 01/20/2016 Title: Manager		
Processed 01/20/2016		* Electronically provided signatures are accepted as original signatures.				