

No. W 101491	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. BLUE WATER DAYS, LLC MICHELLE P SOVINE PO BOX 50562 PROVO UT 84605	SCOTT P ESKELSON 425 S HOLMES AVE IDAHO FALLS ID 83401				
		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	MICHELLE P SOVINE	PO BOX 50562	PROVO	UT	USA	84605
5. Organized Under the Laws of: ID W 101491	6. Annual Report must be signed.* Signature: Michelle Sovine Name (type or print): Michelle Sovine		Date: 02/01/2016 Title: Member			
Processed 02/01/2016		* Electronically provided signatures are accepted as original signatures.				