

No. W 176853	Due no later than Jan 31, 2018 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. TROPICALLY BOLD LLC INEKE S LEON 812 MAIN AVE N STE 2 TWIN FALLS ID 83301 USA		INEKE S LEON 812 MAIN AVE N STE 2 TWIN FALLS ID 83301			
			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	INEKE S LEON	3081 E 3400 N	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID W 176853	6. Annual Report must be signed.* Signature: Ineke S Leon Name (type or print): Ineke S Leon		Date: 01/15/2018 Title: Principle			
Processed 01/15/2018		* Electronically provided signatures are accepted as original signatures.				