

No. W 6139	Due no later than May 31, 2017 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. CENTERS FARM, LLC ALLEN LEE CENTERS PO BOX 518 MERIDIAN ID 83680-0518		ALLEN LEE CENTERS 3770 SOUTH LINDER ROAD MERIDIAN ID 83642			
			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	ALLEN LEE CENTERS	3770 SOUTH LINDER ROAD	MERIDIAN	ID		83642
5. Organized Under the Laws of: ID W 6139		6. Annual Report must be signed.* Signature: lee centers Name (type or print): lee centers Date: 03/22/2017 Title: manager				
Processed 03/22/2017		* Electronically provided signatures are accepted as original signatures.				