

No. <b>W 54092</b>		<b>Due no later than Sep 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  AMERICAN N.W. OUTDOORS LLC JIM WELLS P.O. BOX 391 FRUITLAND ID 83619		JIM WELLS 511 NW 21ST ST FRUITLAND ID 83619			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	JIM WELLS	5540 CUSTER RD	NEW PLYMOUTH	ID	USA	83655	
MANAGER	LISA WELLS	5540 CUSTER ROAD	NEW PLYMOUTH	ID	USA	83655	
MANAGER	JACK WELLS	536 17TH AVE N	PAYETTE	ID	USA	83661	
5. Organized Under the Laws of:  <b>ID</b> <b>W 54092</b>		6. Annual Report must be signed.*  Signature: Lisa Wells Name (type or print): Lisa Wells					
		Date: 07/20/2015 Title: Manager					
Processed 07/20/2015      * Electronically provided signatures are accepted as original signatures.							