No. <b>W 56873</b>		Due no later than Dec 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Addi TWO TAILS, LLC SALLY NIHIPALI 4503 FEDERAL W	Annual Report Form  1. Mailing Address: Correct in this box if needed.  TWO TAILS, LLC		SALLY A NIHIPALI 4503 FEDERAL WAY BOISE ID 83716  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE							
4. Limited Liability Companies: En	ter Names and Addresses o	f at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER SALLY	CK W NIHIPALI A NIHIPALI M NIHIPALI	4503 S FEDERAL WAY 4503 FEDERAL WAY 4503 FEDERAL WAY	BOISE BOISE BOISE	ID ID ID	USA	83716 83716 83716	
5. Organized Under the Laws of:	6. Annual Report m	6. Annual Report must be signed.*					
ID Signature: Sally A W 56873 Name (type or pri		A Nihipali int): Sally A Nihipali		Date: 10/21/2015 Title: Member Manager			
Processed 10/21/2015		* Electronically provided signatures are accepted as original signatures.					