No. W 143096		Due no later than Oct 31, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. LWJ POWELL, LLC WILLIAM POWELL 35 WINTERGREEN CT DRIGGS ID 83422		WILLIAM POWELL 35 WINTERGREEN CT DRIGGS ID 83422 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nam	nes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MANAGER	JAMES ALLEN WILLIAM PAU		1914 BERNDT HILL DR. S. 35 WINTERGREEN CT	SALEM DRIGGS	OR ID	USA USA	97302 83422	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: William Powell		Date: 08/30/2016				
W 143096		Name (type or print): William Powell		Title: manager				
Processed 08/30/2016 * Electronically provided signatures are accepted as original signatures.								