No. W 184551		Due no later than Jun 30, 2018			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. ITALIAN PEAKS LLC JASON S THOMASON 945 COUNTRY RD SUGAR CITY ID 83448 USA		945 COUNTI SUGAR CITY	JASON THOMASON 945 COUNTRY RD SUGAR CITY ID 83448 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compan	ies: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	JASON S T	HOMASON	945 COUNTRY ROAD	SUGAR CITY	ID	USA	83448	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jas		Date: 06/13/2018				
W 184551		Name (type or		Title: Manager				
Processed 06/13/2018 * Electronically provided signatures are accepted as original signatures.								