No. <b>W 148328</b>		Due no later than Feb 28, 2017		2.	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.  SAGE CREEK EVENTS, LLC CALLIANNE HARRIS 6635 E HARRINGTON DR NAMPA ID 83687		1	CALLIANNE HARRIS 6635 E HARRINGTON DR NAMPA ID 83687  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses	of at least one Member or Manager					
Office Held	Name	nes and radi esses	Street or PO Address	C	City	State	Country	Postal Code
MANAGER CALLIANNE I		HARRIS	6635 E HARRINGTON DR	N	, IAMPA	ID	USA	83687
5. Organized Under the Laws of:  ID  W 148328		6. Annual Report must be signed.* Signature: CALLIANNE HARRIS Name (type or print): CALLIANNE HARRIS			Date: 05/09/2017 Title: MANAGER			
Processed 05/09/2017 * Electronically provided signatures are accepted as original signatures.								