No. C 183400		Due no later than Jun 30, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		LIEFDE DRUSSEL			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	123 PAYR LIEFDE D 34 E MAIN		ST ANTHONY	34 E MAIN ST ST ANTHONY ID 83445 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DAT							
4. Corporations: Enter Names a	and Business Addresse	s of President, Secretary, and Directors. Tre	asurer (optional).				
Office Held Nam	ne	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT LIEFDE DRUSSEL		34 EAST MAIN ST.	ST. ANTHONY	ID	USA	83445	
5. Organized Under the Laws o	of: 6. Annual Re	6. Annual Report must be signed.*					
ID ID	Signature	Signature: LIEFDE DRUSSEL		Date: 05/12/2016			
C 183400	Name (ty	Name (type or print): LIEFDE DRUSSEL		Title: PRESIDENT			
Processed 05/12/2016	* Electronica	* Electronically provided signatures are accepted as original signatures.					