

No. <b>W 56597</b>		<b>Due no later than Nov 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  P CROSS RANCH, LLC SCOTT MCAFEE 4748 OLD LOOP RD MACKAY ID 83251		SCOTT MCAFEE 4748 OLD LOOP RD MACKAY ID 83251			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	SCOTT MCAFEE	4748 OLD LOOP RD	MACKAY	ID	83251		
MANAGER	GAIL MCAFEE	4748 OLD LOOP RD	MACKAY	ID	83251		
5. Organized Under the Laws of:  <b>ID</b> <b>W 56597</b>		6. Annual Report must be signed.*  Signature: Scott McAfee Name (type or print): Scott McAfee  Date: 10/02/2015 Title: Manager					
Processed 10/02/2015		* Electronically provided signatures are accepted as original signatures.					