

No. W 169315	Due no later than Jul 31, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. FAIRYBE LLC PO BOX 5064 TWIN FALLS ID 83301		NANCY KESTIE 2211 MAYBERRY LN FILER ID 83328			
			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
MEMBER	NANCY KESTIE	2211 MAYBERRY LN	FILER	ID	USA	83328
5. Organized Under the Laws of: ID W 169315		6. Annual Report must be signed.* Signature: David Fiala Name (type or print): David Fiala Date: 06/25/2018 Title: Accountant				
Processed 06/25/2018		* Electronically provided signatures are accepted as original signatures.				