

No. W 115764	Due no later than Jul 31, 2018 Annual Report Form		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address: Correct in this box if needed.  CATALINA LLC <del>TARA LAVIER</del> 3929 S SHIMMERING WAY Meridian ID 83642 USA  Tina Pagano 3340 W. Catalina Ln. Boise ID 83705		<del>TARA LAVIER</del> 3929 S SHIMMERING WAY Meridian ID 83642-8364 <del>Tina Pagano</del> 3340 W. Catalina Ln. Boise ID 83705
			3. New Registered Agent Signature.  <i>Tina Pagano</i>
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member	Name	Street or PO Address	City State Country Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Tina Pagano 3340 W. Catalina Ln. Boise 83705		
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Tori Pagano Conley 11274 Brentwood Ave Zionsville, IN 46077		
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:  IDAHO W 115764	6. Signature: <i>Tina Pagano</i> Name (type or print): <i>Tina Pagano</i>		
	Date: <u>10/10/18</u> Title: <u>Manager</u>		
Issued 06/04/2018 by online 110113			