No. W 168338		Due no later than Jun 30, 2017		;	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. MOUNTAIN MEADOW CHILDCARE, LLC SHILOH RYKER PO BOX 4467 MCCALL ID 83638			SHILOH BETH RYKER 217 COLT STREET NEW MEADOWS ID 83638-8363 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresse:	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	SHILOH BET	H RYKER	РО		MCCALL	ID	USA	83638
5. Organized Under the Laws of: ID		6. Annual Report must be signed.* Signature: Shiloh Beth Ryker			Date: 07/28/2017			
W 168338		Name (type or print): Shiloh Beth Ryker			Title: Owner and Sole Member			
Processed 07/28/2017 * Electronically provided signatures are accepted as original signatures.								