No. <b>W 45786</b>		Due no later than Dec 31, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		to the state of th	MAUREEN LOUCKS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  DME, LLC  MAUREEN R NEVILLE  1343 BRADLEY ST  TWIN FALLS ID 83301		TWIN FALLS	1343 BRADLEY ST TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		T WITT / KELS I						
200 N	nies: 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	SHANNON NEVILLE		390 BUCHANAN ST.	TWIN FALLS	ID		83301	
MEMBER	MARK NEVIL		3587 N 3000 E	TWIN FALLS	ID		83301	
MEMBER	EILEEN NEV	ILLE	3301 KIPLING RD	BOISE	ID		83706	
MANAGER	MAUREEN NEVILLE		1343 BRADLEY ST	TWIN FALLS	ID		83301	
MEMBER	ANNA NEVILLE		390 BUCHANAN ST	TWIN FALLS	ID	USA	83301	
MEMBER	MATTHEW N	NEVILLE	390 BUCHANAN ST	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report						
ID W 45786		Signature: Ma		Date: 12/15/2015				
		Name (type or		Title: Manager				
Processed 12/15/2015 * Electronically provided signatures are accepted as original signatures.								