

No. <b>W 157581</b>		<b>Due no later than Oct 31, 2016</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>  STERISOLUTION, LLC TAMARA LONG-PARTIE 502 E ST RUPERT ID 83350		TAMARA LONG-PARTIE 502 E ST RUPERT ID 83350-8335			
<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 MANAGER	Name BILL R LONG-PARTEI	Street or PO Address 502		City RUPERT	State ID	Country USA	Postal Code 83350
5. Organized Under the Laws of:  <b>ID</b> <b>W 157581</b>		6. Annual Report must be signed.*  Signature: Tamara Long-Partei Name (type or print): Tamara Long-Partei  Date: 09/16/2016 Title: Owner					
Processed 09/16/2016      * Electronically provided signatures are accepted as original signatures.							