No. W 37716		Due no later than Mar 31, 2017		2. R	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			DENNIS OBRIEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MAGNUSON HAWAII, L.L.C. DENNIS O'BRIEN PO BOX 469 WALLACE ID 83873		V	413 CEDAR ST WALLACE ID 83873 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held	Name		Street or PO Address	Cit	ty	State	Country	Postal Code
MANAGER	H. JAMES N	1AGNUSON	PO BOX 2288	CC	DEUR D'ALENE	ID	USA	83816
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: H. James Magnuson			Date: 01/23/2017			
W 37716		Name (type or print): H. James Magnuson			Title: Manager			
Processed 01/23/2017 * Electronically provided signatures are accepted as original signatures.								