

No. W 119459		Due no later than Nov 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. EXTREME AVENTURA LLC ELIDA LILLY PALACIOS PO BOX 191093 BOISE ID 83719		LILLY PALACIOS 3619 CHUCKWAGON ST BOISE ID 83713			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	ELIDA LILLY PALACIOS	2406 W LEMHI ST	BOISE	ID	USA	83705	
5. Organized Under the Laws of: ID W 119459		6. Annual Report must be signed.* Signature: Lilly Palacios Name (type or print): Lilly Palacios Date: 01/07/2016 Title: Owner					
Processed 01/07/2016		* Electronically provided signatures are accepted as original signatures.					