

No. W 156919	Due no later than Oct 31, 2017 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. CSMC LLC STEVEN RYALS PO BOX 719 COUNCIL ID 83612	STEVEN RYALS 2429 LAPPIN LN COUNCIL ID 83612				
		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	STEVEN E RYALS	2429 LAPPIN LN	COUNCIL	ID	USA	83612
5. Organized Under the Laws of: ID W 156919	6. Annual Report must be signed.* Signature: steve ryals Name (type or print): steve ryals Date: 08/22/2017 Title: pres					
Processed 08/22/2017		* Electronically provided signatures are accepted as original signatures.				