No. W 9294		Due no later than Jul 31, 2017 2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form		JAMES M MACFARLANE 2335 NE 16TH STREET FRUITLAND ID 83619			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JIM MACFARLANE CONSTRUCTION, LLC JAMES L MACFARLANE PO BOX 569					
		NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Compa	nies: Enter Na	mes and Addresses o	f at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	MBER JAMES L MACFARLANE		2335 NE 16TH STREET P.O. BOX 569	FRUITLAND	ID	USA	83619-0569
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
OR W 9294		Signature: Lynn A. McKinney		Date: 05/30/2017			
		Name (type or print): Lynn A. McKinney		Title: Bookkeeper/Sec.			
Processed 05/30/2017		* Electronically provided signatures are accepted as original signatures.					