

No. W 27561		Due no later than Dec 31, 2016		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. REMEMBER WHO YOU ARE, LLC GARY ARCHIBALD 1171 SOUTH 5TH WEST REXBURG ID 83440-5092		D GARY ARCHIBALD 1171 SOUTH 5TH WEST REXBURG ID 83440-5092	
				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	D GARY ARCHIBALD	1171 SOUTH 5TH WEST	REXBURG	ID	83440-5092
MANAGER	PATRICIA S ARCHIBALD	1171 SOUTH 5TH WEST	REXBURG	ID	83440-5092
5. Organized Under the Laws of: ID W 27561		6. Annual Report must be signed.* Signature: D. Gary Archibald Name (type or print): D. Gary Archibald Date: 11/02/2016 Title: manager			
Processed 11/02/2016		* Electronically provided signatures are accepted as original signatures.			