No. W 77637 Return to:		Due no later than Sep 30, 2016 Annual Report Form	2. Registered Agent and Address (NO PO BOX) KRIS EBERLE 410 MAIN ST MARSING ID 83639 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MARSING THRIFT SHOP LLC KRIS EBERLE PO BOX 63 MARSING ID 83639				
NO FILING FEE IF RECEIVED BY DUE DATE						
2001	ipanies: Enter Nar	nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER KRIS EBERLE		3412 GLENNOAK DR	EDWARDSVILLE	IL	USA	62025-5936
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: kris eberle	Date: 09/07/2016			
W 77637		Name (type or print): kris eberle	Title: manager			
Processed 09/07/2016 * Electronically provided signatures are accepted as original signatures.						