

No. W 107466	Due no later than Oct 31, 2016 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. JOHNSON PINECREEK FAMILY, LLC 3120 HWY 3 DEARY ID 83823-9603		SHANNON M MALM 3120 HWY 3 DEARY ID 83823			
			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	SHANNON M MALM	3120 HIGHWAY 3	DEARY	ID	USA	83823
MANAGER	CHRISTINA M METCALF	350 RESERVOIR DRIVE	LEWISTON	ID	USA	83501
5. Organized Under the Laws of: ID W 107466	6. Annual Report must be signed.* Signature: Shannon M Malm Name (type or print): Shannon M Malm		Date: 08/30/2016 Title: Manager			
Processed 08/30/2016		* Electronically provided signatures are accepted as original signatures.				