No. W 4377		Due no later than Jul 31, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MARTIN & ESKELSON PLLC STEPHEN E MARTIN PO BOX 3189 IDAHO FALLS ID 83403		STEPHEN E MARTIN 425 S HOLMES AVE IDAHO FALLS ID 83401 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compani	ies: Enter Na	mes and Addresse	es of at least one Member or Manager	1.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	STEPHEN E	MARTIN	P.O. BOX 277		SWAN VALLEY	ID		83449
5. Organized Under the Laws of:		6. Annual Repor						
ID		Signature: Stephen E. Martin			Date: 06/04/2018			
W 4377		Name (type or print): Stephen E. Martin			Title: Manager			
Processed 06/04/2018	rocessed 06/04/2018 * Electronically provided signatures are accepted as original signatures.							