No. W 60451		Due no later than Mar 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:		nual Report Form	WILLIAM IRVING GILMORE					
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		802 LINCOLN ST POST FALLS ID 83854					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GILMORE CONSULTING SERVICES, LLC WILLI I GILMORE 802 LINCOLN ST		POST FALLS ID 03034					
	POST FALLS ID 8	POST FALLS ID 83854		3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
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		
	IRVING GILMORE	1426 LAKE WASHINGTON BLVD S	SEATTLE	WA		98144		
MEMBER KATHLEEN	FIELDER GILMORE	1426 LAKE WASHINGTON BLVD S	SEATTLE	WA		98144		
5. Organized Under the Laws of:	Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: William Gilmore		Date: 01/23/2017					
W 60451	Name (type or prin	Name (type or print): William Gilmore			Title: Member			
Processed 01/23/2017	* Electronically provid	* Electronically provided signatures are accepted as original signatures.						