No. **W 100024**	**Due no later than Jan 31, 2017**	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.** COMMERCIAL PROPERTIES, LLC WESLEY E MICHAELS PO BOX 10 TROY ID 83871	WESLEY E MICHAELS 510 S MAIN ST TROY ID 83871 3. New 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	WESLEY E MICHAELS	PO BOX 10	TROY	ID	USA	83871

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 100024**	Signature: Wesley Michaels	Date: 01/04/2017
	Name (type or print): Wesley Michaels	Title: Manager

Processed 01/04/2017

* Electronically provided signatures are accepted as original signatures.