

No. W 15109	Due no later than Apr 30, 2018 Annual Report Form		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> REES NAVE 4658 SOUTH HOLMES IDAHO FALLS ID 83404	
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address: Correct in this box if needed.  R & M NAVE FAMILY LLC REES NAVE 4658 SOUTH HOLMES IDAHO FALLS ID 83404		3. New Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Name	Street or PO Address	City	State Country Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Rees Nave 4658 South Holmes Idaho 83404			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Debra Shimer 272 W 8th St. Suite 100, Idaho Falls, ID 83402			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Tayor Roy 225 East 2nd Street, Idaho Falls, ID 83404			
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
5. Organized Under the Laws of:  IDAHO W 15109	6. Signature:  Rees Nave			
	Name (type or print):  Rees Nave			
	Date: 3/10/18			
	Title: 3/10/18			

Issued 02/28/2018 by SLD

101907

#### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM