

No. W 53445		Due no later than Aug 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		1. Mailing Address: Correct in this box if needed. SMACK GROUP LLC (THE) TI R SMACK 647 W WATER GROVE DR EAGLE ID 83616		TI R SMACK 647 W WATER GROVE DR EAGLE ID 83616			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name TI R SMACK	Street or PO Address 647 W WATER GROVE DR		City EAGLE	State ID	Country	Postal Code 83616
5. Organized Under the Laws of: ID W 53445		6. Annual Report must be signed.* Signature: Ti R Smack Name (type or print): Ti R Smack Date: 06/23/2016 Title: Member					
Processed 06/23/2016 * Electronically provided signatures are accepted as original signatures.							