No. W 151620		Due no later than May 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form 1. Mailing Address: Correct in this box if needed. BCM BENEFIT CASE MANAGEMENT, LLC ANDREW LAWRENCE LANTZ 1101 GRELLE AVE		UNITED STATES CORPORATION AGEN 950 BANNOCK ST STE 1100			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	BCM BEN ANDREW			BOISE ID 83702			
	LEWISTO	LEWISTON ID 83501		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	
MEMBER ANDRE	W LAWRENCE LA	ANTZ 1101 GRELLE AVE.	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:	Organized Under the Laws of: 6. Annual Report must be signed.*						
ID	Signatur	ANDREW LAWRENCE LANTZ Date: 03/22/2016				2016	
W 151620	Name (t	Name (type or print): ANDREW LAWRENCE LANTZ		Title: OFFICER			
Processed 03/22/2016	* Electronic	* Electronically provided signatures are accepted as original signatures.					