No. W 159074		Due no later than Nov 30, 2017 Annual Report Form		2	Registered Agent and Address (NO PO BOX) ELIZABETH MURPHY			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			ress: Correct in this box if needed AT ROOM LLC PHY		363 HILLCREST RD BONNERS FERRY ID 83805 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	nies: Enter Nai	mes and Addresses of	f at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	ELIZABETH /	A MURPHY	363 HILLCREST RD		BONNERS FERRY	ID	USA	83805
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Elizabeth Murphy			Date: 12/18/2017			
W 159074		Name (type or print): Elizabeth Murphy			Title: Member			
Processed 12/18/2017	* Electronically provided signatures are accepted as original signatures.							