| No. W 84202 Return to: | | Due no later than May 31, 2018 Annual Report Form | | | | | |
|--|-----------------|---|----|---|-------|---------|-------------|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. CHERALIKE, LLC DEAN PARRISH 8505 JENI LN HARRISON ID 83833 | | 8505 JENI LN HARRISON ID 83833 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Compa | nies: Enter Nar | mes and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | Ci | ty | State | Country | Postal Code |
| MANAGER DEAN PARR | | ISH 8505 JENI LANE | HA | ARRISON | ID | USA | 83833 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Dean Parrish | | Date: 04/04/2018 | | | |
| W 84202 | | Name (type or print): Dean Parrish | | Title: manager | | | |
| Processed 04/04/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | |