No. W 85557		Due no later than Jul 31, 2018		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. 1607 HOUSE, LLC NORMAN J ANDERSON 509 VISTA DR COEUR D ALENE ID 83815 3. New Registered Agent Signature:*						
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of	at least one Member or Manager					
200 80 8	es. Litter ivai Name	ries and Addresses of	Street or PO Address	City	State	Country	Postal Code	
MANAGER	NORMAN J	ANDERSON	509 VISTA DRIVE	COEUR D ALENE	ID	USA	83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 85557		Signature: Norman J. Anderson Date: 05/20/2018						
		Name (type or pri		Title: manager				
Processed 05/20/2018	rocessed 05/20/2018 * Electronically provided signatures are accepted as original signatures.							