| No. W 15822 | | Due no later than Jul 31, 2016 | | 2. Registered | 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. SHS PROPERTIES, LLC SAMUEL G SMITH 1162 W SHEARWATER LN EAGLE ID 83616 | | 1162 W SH | SAMUEL G SMITH 1162 W SHEARWATER LN EAGLE ID 83616 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Regist | 3. <u>New</u> Registered Agent Signature:* | | | |
| 200 | | nes and Address | es of at least one Member or Manager. | C:L | Chaha | C | Destal Cada | |
| | Name SAMUEL G SMITH HOLLIE SMITH | | Street or PO Address 1162 W SHEARWATER LN 1162 W SHEARWATER LN | City EAGLE EAGLE | State ID ID | Country | Postal Code 83616 83616 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Hollie Smith | | Date: 06 | Date: 06/13/2016 | | | |
| W 15822 | | Name (type or print): Hollie Smith | | Title: M | Title: Manager/Vice Pres. | | | |
| Processed 06/13/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |