

No. <b>W 34126</b>	<b>Due no later than Oct 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> CRIPE DISTRIBUTING, LLC RONALD CRIPE 3921 E MAN O WAR LN NAMPA ID 83686		RONALD CRIPE 3921 E MAN O WAR LN NAMPA ID 83686			
			3. <u>New</u> Registered Agent Signature:*			
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	RONALD CRIPE	3921 E MAN O WAR LN	NAMPA	ID		83686
5. Organized Under the Laws of:  <b>ID W 34126</b>	6. Annual Report must be signed.* Signature: Mike Mahoney Name (type or print): Mike Mahoney		Date: 09/27/2017 Title: CPA			
Processed 09/27/2017		* Electronically provided signatures are accepted as original signatures.				