No. W 154830		Due no later than Aug 31, 2018		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JARIN O HAMMER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MICHAEL ANDERSON DO PLLC JARIN O HAMMER 2105 CORONADO ST IDAHO FALLS ID 83404 2105 CORONADO ST IDAHO FALLS ID 83404 3. New Registered Agent Signature:*						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MICHAEL AND		DERSON	880 N 550 E	FIRTH	ID	USA	83236	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ja	Da	Date: 09/05/2018				
W 154830		Name (type o	r print): Jarin O. Hammer	Tit	Title: Registered Agent			
Processed 09/05/2018		* Electronically provided signatures are accepted as original signatures.						