

No. <b>W 153938</b>		<b>Due no later than Jul 31, 2018</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>1. Mailing Address: Correct in this box if needed.</b>  SLP LLC PO BOX 592 MACKAY ID 83251		SHANNA PEDERSON 412 S SPRUCE ST MACKAY ID 83251			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name SHANNA PEDERSON	Street or PO Address 412 SPRUCE ST		City MACKAY	State ID	Country USA	Postal Code 83251
5. Organized Under the Laws of:  <b>ID</b> <b>W 153938</b>		6. Annual Report must be signed.*  Signature: Julie Hansen Name (type or print): Julie Hansen  Date: 06/27/2018 Title: Reporting Agent					
Processed 06/27/2018 * Electronically provided signatures are accepted as original signatures.							