

No. W 157777	Due no later than Oct 31, 2016 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. FACILITIES CONSULTING NW, LLC MIKE KAUFFMAN PO BOX 2486 SANDPOINT ID 83864	MIKE KAUFFMAN 2867 WRENCO LOOP SANDPOINT ID 83864				
		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
MANAGER	MIKE KAUFFMAN	PO BOX 2486	SANDPOINT	ID	USA	83864
5. Organized Under the Laws of: ID W 157777	6. Annual Report must be signed.* Signature: Mike Kauffman Name (type or print): Mike Kauffman		Date: 10/13/2016 Title: Owner			
Processed 10/13/2016		* Electronically provided signatures are accepted as original signatures.				