No. <b>W 101822</b>		Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	MIKEL HARDY				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if need SPUR AVIATION SERVICES, LC MIKEL G HARDY 203 JOSLIN WAY TWIN FALLS ID 83301	ded.	203 JOSLIN WAY TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses of at least one Member or Manager	r.				
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
MEMBER MIKEL G HA		RDY 3644 SAGE VIEW LANE		KIMBERLY	ID	USA	83341
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: MIKEL HARDY		Date: 01/23/2018			
W 101822		Name (type or print): MIKEL HARDY	Title: DIRECTOR OF OPERATIONS				
Processed 01/23/2018 * Electronically provided signatures are accepted as original signatures.							