No. W 49321		Due no later than Apr 30, 2017		2. Registe	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		N 0000 00 1000	GARY WOLVERTON JR			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		GRANDVIEW FA GARY WOLVER PO BOX 5179	•	TWINI	1411 FALLS AVNEUE E. STE 1002 TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
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 GARY WOLVE		ERTON JR	PO BOX 5179	TWIN FA	ALLS ID		83303-5179	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 49321		Signature: Bethany Neglia			Date: 03/27/2017			
		Name (type or print): Bethany Neglia			Title: Receptionist			
Processed 03/27/2017 * Electronically provided signatures are accepted as original signatures.								