

No. W 155879	Due no later than Sep 30, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) Need to Appoint <i>Jamie Rhoda</i>
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. RIZO'S PIZZA, LLC JAMIE RHODA 2168 BERGGREN LANE IDAHO FALLS ID 83401		3. <u>New Registered Agent Signature.</u> <i>Jamie Rhoda</i>

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	<i>Jamie Rhoda, 2168 Berggren Lane, Idaho Falls, ID 83401</i>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 155879 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: <i>Jamie Rhoda</i></td> <td style="width: 40%;">Date: <i>7-2-16</i></td> </tr> <tr> <td>Name (type or print): <i>Jamie Rhoda</i></td> <td>Title: <i>Registered Manager</i></td> </tr> </table>	Signature: <i>Jamie Rhoda</i>	Date: <i>7-2-16</i>	Name (type or print): <i>Jamie Rhoda</i>	Title: <i>Registered Manager</i>
Signature: <i>Jamie Rhoda</i>	Date: <i>7-2-16</i>				
Name (type or print): <i>Jamie Rhoda</i>	Title: <i>Registered Manager</i>				