

No. W 103978		Due no later than Jun 30, 2017 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		1. Mailing Address: Correct in this box if needed. POSTYPARTNERS LLC SCOTT LEWIS 2804 W SORBONNE DR COEUR D ALENE ID 83815		SCOTT LEWIS 2804 W SORBONNE DR COEUR D ALENE ID 83815			
NO FILING FEE IF RECEIVED BY DUE DATE				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	
MEMBER	SUSAN K LEWIS	2804 W SORBONNE DR.	COEUR D'ALENE	ID	USA	83815	
MANAGER	SCOTT LEWIS	2804 W SORBONNE DR	COEUR D'ALENE	ID	USA	83815	
MEMBER	PATRICIA L LEWIS	2804 W SORBONNE DR	COEUR D'ALENE	ID	USA	83815	
MEMBER	TERRY W LEWIS	2804 W SORBONNE DR	COEUR D'ALENE	ID	USA	83815	
5. Organized Under the Laws of: ID W 103978		6. Annual Report must be signed.* Signature: Scott Lewis Name (type or print): Scott Lewis Date: 04/28/2017 Title: Manager					
Processed 04/28/2017		* Electronically provided signatures are accepted as original signatures.					