

No. <b>W 143910</b>	<b>Due no later than Oct 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<b>1. Mailing Address: Correct in this box if needed.</b>  ID MALONE 1, LLC 3649 N. LAKEHARBOR LANE BOISE ID 83703 USA		T J ANGSTMAN 3649 N LAKEHARBOR LN BOISE ID 83703				
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name ALAN MALONE	Street or PO Address 4784 RIVERFRONT PLACE	City GARDEN CITY	State ID	Country USA	Postal Code 83714	
5. Organized Under the Laws of:  <b>ID</b> <b>W 143910</b>	6. Annual Report must be signed.*  Signature: Thomas J. Angstman Name (type or print): Thomas J. Angstman					Date: 08/22/2017 Title: Authorized Agent	
Processed 08/22/2017	* Electronically provided signatures are accepted as original signatures.						