No. <b>W 124035</b>		Due no la	ter than Apr 30, 2016	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CHRISTOPHER W JAMES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SHILOH WARM SPRINGS RANCH, LLC CHRISTOPHER WOLFE JAMES PO BOX 510 CHALLIS ID 83226-0510		3880 GARDEN CREEK RD CHALLIS ID 83226  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compar	nies: Enter Nam	nes and Addresses of at I	least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	DEBRA ELLEN JAMES		3880 GARDEN CREEK RD P O BOX 510	CHALLIS	ID	USA	83226-0510
MANAGER	CHRISTOPHE	R WOLFE JAMES	3880 GARDEN CREEK ROAD P O BOX 510	CHALLIS	ID	USA	83226-0510
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 124035		Signature: Christopher W. James			Date: 02/23/2016		
		Name (type or print): Christopher W. James			Title: Manager		
Processed 02/23/2016	>	* Electronically provided	signatures are accepted as original signa	atures.			