

No. <b>W 72189</b>		<b>Due no later than Mar 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		1. Mailing Address: Correct in this box if needed.  RTR1, LLC SYNDEE KEMP 2600 STONE RIVER CIR. POCATELLO ID 83204		SYNDEE KEMP 2600 STONE RIVER CIR POCATELLO ID 83204			
<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	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	BRAD FRASURE	444 HOSPITAL WY STE 555	POCATELLO	ID	83201		
MANAGER	JEFF MAYNARD	11956 N HILINE	POCATELLO	ID	83202		
MANAGER	RICHARD E FELLOWS	636 GARY ST	POCATELLO	ID	83201		
MANAGER	JEDEDIAH M FELLER	2871 N TENAYA WAY	LAS VEGAS	NV	89128		
MANAGER	SYNDEE A. KEMP	2600 STONE RIVER CIR.	POCATELLO	ID	USA	83204	
5. Organized Under the Laws of:  <b>ID</b> <b>W 72189</b>		6. Annual Report must be signed.*  Signature: syndee kemp Name (type or print): syndee kemp					
		Date: 01/30/2017 Title: manager					
Processed 01/30/2017		* Electronically provided signatures are accepted as original signatures.					