

No. <b>W 148815</b>		<b>Due no later than Mar 31, 2017</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> DAILEY INSURANCE DEALER NETWORK SERVICES LLC LUISA DAILEY 1542 S TIMESQUARE LN STE 101 BOISE ID 83709		LUISA DAILEY 1542 S TIMESQUARE LN STE 101 BOISE ID 83709			
				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	JOSEPH DAILEY	1542 TIMESQUARE LN SUITE 101	BOISE	ID	USA	83709	
MEMBER	LUISA DAILEY	1542 S TIMESQUARE LN SUITE 101	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 148815</b>		Signature: Luisa Dailey				Date: 01/24/2017	
		Name (type or print): Luisa Dailey				Title: Agent Principal	
Processed 01/24/2017		* Electronically provided signatures are accepted as original signatures.					