

No. <b>W 74099</b>		<b>Due no later than May 31, 2016</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>  CHIMONAS ENTERPRISES LLC SOT CHIMONAS 1739 W. COLCHESTER DR. EAGLE ID 83616		SOT CHIMONAS 1739 W. COLCHESTER DR. EAGLE ID 83616		
<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 SOT CHIMONAS	Street or PO Address 1739 W. COLCHESTER DR.	City EAGLE	State ID	Country	Postal Code 83616
5. Organized Under the Laws of:  <b>ID</b> <b>W 74099</b>		6. Annual Report must be signed.*  Signature: Sot Chimonas Name (type or print): Sot Chimonas  Date: 05/23/2016 Title: President				
Processed 05/23/2016 * Electronically provided signatures are accepted as original signatures.						