

No. W 158470	Due no later than Nov 30, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) WAYNE MOSES 1934 BETH ST POCATELLO ID 83201
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MOSES CABIN L.L.C. (THE) 1934 BETH ST POCATELLO ID 83201		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Wayne Moses	1934 Beth St	Pocatello,	ID	USA	83201
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Janet Moses	2120 Hancock Ardella	Pocatello,	ID	USA	83201
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	April Nelson	12036 W Hiawatha Dr.	Boise,	ID	USA	83709
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Mikkel Nelson	12036 W. Hiawatha Dr	Boise,	ID	USA	83709

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 158470 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <u>Wayne Moses</u> </td> <td style="width: 40%;"> Date: <u>10-6-17</u> </td> </tr> <tr> <td> Name (type or print): <u>Wayne Moses</u> </td> <td> Title: <u>10-6-17</u> </td> </tr> </table>	Signature: <u>Wayne Moses</u>	Date: <u>10-6-17</u>	Name (type or print): <u>Wayne Moses</u>	Title: <u>10-6-17</u>
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