No. **W 16307**	**Due no later than Aug 31, 2017** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** POPPLETON PROPERTIES, LLC KYLE D POPPLETON 1001 SHOSHONE ST NORTH TWIN FALLS ID 83301	KYLE DAVID POPPLETON 1001 SHOSHONE ST NORTH TWIN FALLS ID 83301 3. New 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	KYLE DAVID POPPLETON	1001 SHOSHONE ST NORTH	TWIN FALLS	ID		83301

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 16307**	Signature: kyle poppleton	Date: 11/09/2017
	Name (type or print): kyle poppleton	Title: member

Processed 11/09/2017

* Electronically provided signatures are accepted as original signatures.