No. W 154833		Due no later than Aug 31, 2016		2. Registe	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			WRANGLER WILLIAMS 3950 N. 3580 W. MOORE ID 83255 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. LOST RIVER PLUMBING LLC WRANGLER WILLIAMS 3950 N. 3580 W. MOORE ID 83255 USA		MOORI				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Com	ipanies: Enter Na	mes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER JESICA WILLIAMS		LIAMS	3950 N. 3580 W.	MOORE	ID	USA	83255	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Wrangler Williams			Date: 09/20/2016			
W 154833		Name (type or print): Wrangler Williams			Title: Owner			
Processed 09/20/2016 * Electronically provided signatures are accepted as original signatures.								