| No. W 63614 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Due no later than Jun 30, 2016 Annual Report Form | | CA | Registered Agent and Address (NO PO BOX) CATHRYN STILLMAN 165 FRONT ST DRIGGS ID 83452 3. New Registered Agent Signature:* | | | | |
|---|---|---|--|------|--|----------|---------|--------------------------|--|
| | | 1. Mailing Address: Correct in this box if needed. 165 FRONT ST., LLC WINSTON WELCH 5029 HWY 33 TETONIA ID 83452 | | DF | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | | |
| 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 | |
| | WINSTON WELCH CATHRYN STILLMAN | | 5029 NORTH HWY 33 5029 NORTH HWY 33 | | ONIA ONIA | CA ID | USA | 83452-4978 83452-4978 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | | |
| ID W 63614 | | Signature: SAID PARSI | | | Date: 07/19/2016 | | | | |
| | | Name (type or print): SAID PARSI | | | Title: CPA | | | | |
| Processed 07/19/2016 | * Electronically provided signatures are accepted as original signatures. | | | | | | | | |