No. W 107849		D	Due no later than Oct 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SONJA COLEMAN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				HAILEY ID	1010 FOXMOOR DRIVE HAILEY ID 83333 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	ames and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	EMBER SONJA COLEN		1010 FOXMOOR DR.	HAILEY	ID	USA	83333	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: S	onja Coleman		Date: 10/05/2017			
W 107849		Name (type	or print): Sonja Coleman		Title: Manager			
Processed 10/05/2017 * Electronically provided signatures are accepted as original signatures.								