

No. W 119599	Due no later than Dec 31, 2016 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.		REGISTERED AGENTS INC 1900 NORTHWEST BLVD STE 106A COEUR D'ALENE ID 83814			
	LIL MOE'S DAYCARE LLC SARAH BINGLE 1299 SCHNEIDER RD POTLATCH ID 83855		3. <u>New</u> 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	SARAH LIL MOES DAYCARE	940 CEDAR ST 1299 SCHNEIDER RD	POTLATCH	IS	USA	83855
5. Organized Under the Laws of: ID W 119599		6. Annual Report must be signed.* Signature: Sarah Bingle Name (type or print): Sarah Bingle		Date: 01/19/2017 Title: Owner		
Processed 01/19/2017		* Electronically provided signatures are accepted as original signatures.				