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| No. W 37353 | | Due no later than Mar 31, 2017 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. COFFEE BREAK, LLC JUSTUN MCCALL PO BOX 610 PAUL ID 83347-0610 | | JUSTIN MCCALL 185 N 500 W RUPERT ID 83350 | |
| | | | | 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 | JUSTUN MCCALL | 355 WEST 300 NORTH | RUPERT | ID | 83350 |
| 5. Organized Under the Laws of: ID W 37353 | | 6. Annual Report must be signed.* Signature: Justun McCall Name (type or print): Justun McCall Date: 01/26/2017 Title: owner | | | |
| Processed 01/26/2017 | | * Electronically provided signatures are accepted as original signatures. | | | |