No. W 162095		Due no later than Feb 28, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		WAYNE TRAV				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. WAYNE AGEE APPRAISALS, LLC WAYNE TRAVIS AGEE 1031 ALDER AVE			1031 ALDER AVE LEWISTON ID 83501			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			LEWIS TON II				
	LEWISTON ID 83501		3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	1.10 1.22.22						
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	
MANAGER WAYNE TRAVIS AGEE		1031 ALDER AVENUE	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Wayne T Agee			Date: 01/03/2017			
W 162095	Name (type or print): Wayne T Agee			Title: Owner			
Processed 01/03/2017	* Electronically provided signatures are accepted as original signatures.						