No. W 136843		Due no later than Apr 30, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			MICHAEL ANTON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CORE SURVIVAL LLC MICHAEL ANTON 3595 N GREENSFERRY RD POST FALLS ID 83854		POST FALLS	3595 N GREENSFERRY RD POST FALLS 83854 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companie	es: Enter Nar	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER N	MICHAEL PA	UL ANTON	3595 N. GREENSFERRY RD.	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: michael anton			Date: 02/25/2015			
W 136843		Name (type or		Title: member				
Processed 02/25/2015 * Electronically provided signatures are accepted as original signatures.								