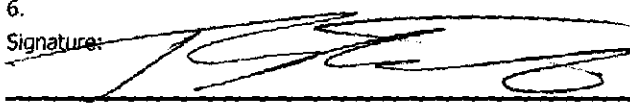


No. W 183745	Due no later than Jun 30, 2018 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) TIMOTHY JOEL STEELE 11500 W PATHVIEW STAR ID 83669
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TRU NORTH VENTURES LLC TIMOTHY JOEL STEELE 11500 W PATHVIEW STAR ID 83669		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	TIM STEELE	11500 W PATHVIEW STAR,	ID			83669
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	KRISTINE STEELE					
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 183745</div>	6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> Signature:  <hr/> Name (type or print): <div style="border-bottom: 1px solid black; padding-bottom: 2px;">TIM STEELE</div> </div> <div style="width: 35%;"> Date: 6/11/18 <hr/> Title: <div style="border-bottom: 1px solid black; padding-bottom: 2px;">MANAGER</div> </div> </div>
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Issued 06/11/2018 by TLB
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