

No. W 41193		Due no later than Jul 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. SERAPHINE SOLUTIONS, LLC MARK D CASSON 341 EASTRIDGE DRIVE HAILEY ID 83333		MARK D CASSON 341 EASTRIDGE DR HAILEY ID 83333	
				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	MARK D CASSON	341 EASTRIDGE DRIVE	HAILEY	ID	83333
5. Organized Under the Laws of: ID W 41193		6. Annual Report must be signed.* Signature: M.D. Casson Name (type or print): M.D. Casson Date: 06/09/2017 Title: Member			
Processed 06/09/2017		* Electronically provided signatures are accepted as original signatures.			