No. <b>W 77870</b>		Due no later than Sep 30, 2018	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.	KELLI J HALL 2799 S. LIMERICK PL.			
		HOLIDAY DREAM TEAM, LLC. KELLI HALL 2799 S. LIMERICK PL EAGLE ID 83616	EAGLE ID 83616  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Comp	anies: Enter Nai	mes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER KELLI J HAL		L 2799 S. LIMERICK PL.	EAGLE	ID	USA	83616
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID W 77870		Signature: Kelli Hall	Date: 08/16/2018			
		Name (type or print): Kelli Hall	Title: Owner / Manager			
Processed 08/16/2018 * Electronically provided signatures are accepted as original signatures.						