No. <b>W 178137</b>		Due no later than Feb 28, 2018	2. Registered Ag	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.  SKYLINE NETWORKS LLC  JOEL PHILLIPS PO BOX 2986 POCATELLO ID 83206	275 S 5TH AV POCATELLO	JOEL PHILLIPS 275 S 5TH AVE STE 151 POCATELLO ID 83201-8320  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4 Limited Liability Companies: Enter Nar		nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER JOEL PHILLII		PS 275 S 5TH AVE STE 151	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:  ID  W 178137		6. Annual Report must be signed.* Signature: JOEL PHILLIPS Name (type or print): JOEL PHILLIPS	Date: 01/22/2018 Title: MEMBER				
Processed 01/22/2018 * Electronically provided signatures are accepted as original signatures.							