No. <b>W 26144</b>		Due no later than Sep 30, 2016	2. Registered Agent and Address (NO PO BOX)  AMY CALLAHAN 1919 WARM SPRINGS RD. #2 KETCHUM ID 83340  3. New Registered Agent Signature:*			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SUN VALLEY ULTIMATE SERVICES, LLC  PAGE W. KLUNE  P O BOX 2361  SUN VALLEY ID 83353				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Compa	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
MEMBER PAGE KLUNE		P.O. BOX 6809	KETCHUM	ID		83340
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: PAGE W. KLUNE	Date: 07/29/2016			
W 26144		Name (type or print): PAGE W. KLUNE	Title: PARTNER			
Processed 07/29/2016 * Electronically provided signatures are accepted as original signatures.						