

No. W 156013	Due no later than Sep 30, 2016 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. 885 SOUTH 12 EAST, LLC SUSAN REED PO BOX 903 LONGMONT CO 80502	OCON GROUP LLC 1070 S 3RD W B STREET HOUSE MOUNTAIN HOME ID 83647				
		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
MANAGER	SUSAN REED	1070 S. 3RD WEST B STREET, HOU	MOUNTAIN HOME	ID	USA	83647
5. Organized Under the Laws of: ID W 156013	6. Annual Report must be signed.* Signature: Susan Reed Name (type or print): Susan Reed		Date: 09/21/2016 Title: Man			
Processed 09/21/2016		* Electronically provided signatures are accepted as original signatures.				