No. **W 86884**	**Due no later than Sep 30, 2015** **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.** BADGER SAGLE LLC MICHAEL L BADGER PO BOX 2950 POST FALLS ID 83877	MICHAEL L BADGER 2813 E SELTICE WAY POST FALLS ID 83864 3. New 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	MICHAEL L BADGER	P O BOX 2950	POST FALLS	ID	USA	83877-2950

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 86884**	Signature: michael l badger	Date: 07/22/2015
	Name (type or print): michael l badger	Title: member

Processed 07/22/2015

* Electronically provided signatures are accepted as original signatures.