

No. W 153767		Due no later than Jul 31, 2018 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		1. Mailing Address: Correct in this box if needed. TRIPLE O CALVES LLC BREANNE CARSON PO BOX 463 GREENLEAF ID 83626		BREANNE CARSON 20912 WHITTIER DR. GREENLEAF ID 83626			
NO FILING FEE IF RECEIVED BY DUE DATE				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
MEMBER	BREANNE YVONNE NADINE CARSON	20912 WHITTIER DR.		GREENLEAF	ID	USA	83626
5. Organized Under the Laws of: ID W 153767		6. Annual Report must be signed.* Signature: Breanne Carson Name (type or print): Breanne Carson Date: 05/22/2018 Title: Member					
Processed 05/22/2018 * Electronically provided signatures are accepted as original signatures.							