| No. W 49657 | | Due no later than Apr 30, 2017 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|--------------------|---|----------------------|--|-----------|-------|---------|-------------|
| Return to: | | Annual Report Form | | PERRY E WARD | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. RAFTER W SADDLERY, LLC PERRY E WARD 998 N 1500 W BLACKFOOT ID 83221 | | 998 N 1500 W BLACKFOOT ID 83221 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 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 | EMBER PERRY E WARD | | 998 N 1500 W | | BLACKFOOT | ID | | 83221 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 49657 | | Signature: perry ward | | Date: 02/27/2017 | | | | |
| | | Name (type or print): perry ward | | Title: member | | | | |
| Processed 02/27/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |