

No. <b>W 98172</b>	<b>Due no later than Nov 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> AMF1B, LLC MICHAEL W MCCABE 372 S EAGLE ROAD PMB 336 EAGLE ID 83616		POLLY KUEN 15079 HORSESHOE DR CALDWELL ID 83607			
			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	MIKE W MCCABE	3953 S WASATCH BLVD PMB 222	SALT LAKE CITY	UT	USA	84124
5. Organized Under the Laws of:  <b>ID</b> <b>W 98172</b>	6. Annual Report must be signed.* Signature: mike mccabe Name (type or print): mike mccabe		Date: 10/01/2015 Title: manager			
Processed 10/01/2015		* Electronically provided signatures are accepted as original signatures.				