No. W 180184 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Mar 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. SBI, LLC NATHANIAL D STORY 1719 NORTHSHORE DR SANDPOINT ID 83864		2. Registered Agent and Address (NO PO BOX) NATHANIAL D STORY 1719 NORTHSHORE DR SANDPOINT ID 83864 3. New Registered Agent Signature:*			
		4. Limited Liability Compa	nies: Enter Na	mes and Address	es of at least one Member or Manager.		
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER MEMBER	AMANDA STORY NATHANIAL STORY		1719 NORTHSHORE DR. 1719 NORTHSHORE DR.	SANDPOINT SANDPOINT	ID ID	USA USA	83864 83864
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Na	athanial Story	Date: 02/14/2018			
W 180184		Name (type o	r print): Nathanial Story	Title: Owner			
Processed 02/14/2018		* Electronically provided signatures are accepted as original signatures.					