

No. W 144683	Due no later than Nov 30, 2017 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. AMRI-SKYLINE LLC. STEVEN M SHAFRAN PO BOX 6893 KETCHUM ID 83340		STEVEN M SHAFRAN 671 ALPINE LANE KETCHUM ID 83340-8334			
			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	STEVEN SHAFRAN	PO BOX 6893	KETCHUM	ID	USA	83340
5. Organized Under the Laws of: ID W 144683	6. Annual Report must be signed.* Signature: Steven M Shafran Name (type or print): Steven M Shafran		Date: 09/18/2017 Title: Manager			
Processed 09/18/2017		* Electronically provided signatures are accepted as original signatures.				