No. W 168054			Due no later than Jun 30, 2017	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		MES THO 207	Annual Report Form Mailing Address: Correct in this box if needed. H SOFTWARE LLC MAS DAY N 6TH ST MA ID 83660	THOMAS DAY 207 N 6TH ST PARMA ID 83660 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Comp	oanies: Enter	Names and	Addresses of at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MANAGER	THOMAS	DAY	207 N 6TH ST	PARMA	ID	USA	83660
5. Organized Under the Laws of:		6. Ann	ual Report must be signed.*				
ID		Sign	nature: Thomas L Day	Date: 07/24/2017			
W 168054		Nam	ne (type or print): Thomas L Day	Title: Manager			
rocessed 07/24/2017 * Electronically provided signatures are accepted as original signatures.							