No. W 186043		Due no later than Jul 31, 2018		2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MCCALL SUPPLY, LLC PO BOX 2663 MCCALL ID 83638 USA		_	LESLIE L ROBERTS 300 KRAHN LANE MCCALL ID 83638 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mos and Addrossos of a	t loost one Member or Manager					
Office Held	Name	illes and Addresses of a	Street or PO Address		City	State	Country	Postal Code
MANAGER	LESLIE L ROBERTS		300 KRAHN LN.		MCCALL	ID	USA	83638
5. Organized Under the Laws of: ID W 186043		6. Annual Report must be signed.* Signature: Leslie Roberts Name (type or print): Leslie Roberts			Date: 05/31/2018 Title: Manager			
Processed 05/31/2018		* Electronically provided signatures are accepted as original signatures.						