No. W 107475		Due no later than Oct 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. CART WRAPPERS, LLC SAM J CARLINO 5070 EAST SELTICE WAY STE. B POST FALLS ID 83854 USA		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				SAM J CARLINO 5070 EAST SELTICE WAY STE B POST FALLS ID 83854 3. New Registered Agent Signature:*			
		mes and Addresses of	at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MANAGER SAM J CARLINO		LINO	5070 EAST SELTICE WAY STE B	POST FALLS	ID	USA	83854
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: France	Date: 08/29/2016				
W 107475		Name (type or pri	Title: Office Manager				
Processed 08/29/2016		Electronically provided signatures are accepted as original signatures.					