

No. W 76582		Due no later than Aug 31, 2016 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		1. Mailing Address: Correct in this box if needed. BEHRENS FAMILY I, LLC ROB S BEHRENS 84 STEWARTS DR SAGE ID 83860		ROB BEHRENS 84 STEWARTS DR SAGE ID 83860			
NO FILING FEE IF RECEIVED BY DUE DATE				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	ROB S BEHRENS	236 STEWARTS DR	SAGE	ID	USA	83860	
MEMBER	TONYA M BEHRENS	84 STEWARTS DR	SAGE	ID	USA	83860	
5. Organized Under the Laws of: ID W 76582		6. Annual Report must be signed.* Signature: tonya behrens Name (type or print): tonya behrens					
		Date: 08/03/2016 Title: member					
Processed 08/03/2016		* Electronically provided signatures are accepted as original signatures.					