

No. <b>W 51317</b>	<b>Due no later than Jun 30, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		KARALEE ROBINSON 495 1ST STREET IDAHO FALLS ID 83401			
	ROBINSON PROPERTY MANAGEMENT, LLC KARALEE ROBINSON 495 1ST STREET IDAHO FALLS ID 83401		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
MEMBER	JOHN D. ROBINSON	495 1ST STREET	IDAHO FALLS	ID		83401
MEMBER	KARALEE ROBINSON	495 1ST STREET	IDAHO FALLS	ID		83401
5. Organized Under the Laws of:  <b>ID</b> <b>W 51317</b>	6. Annual Report must be signed.*					
		Signature: KARALEE ROBINSON	Date: 04/25/2016			
		Name (type or print): KARALEE ROBINSON	Title: OWNER			
Processed 04/25/2016		* Electronically provided signatures are accepted as original signatures.				