No. <b>W 165440</b> Return to:		Due no later than Apr 30, 2017 Annual Report Form	Registered Agent and Address (NO PO BOX)     CAROL THOMPSON				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  TIMBER HAVEN LLC CAROL THOMPSON PO BOX 2512 SANDPOINT ID 83864	SANDPOINT	205 HALLEY ST #5 SANDPOINT ID 83864-8386  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compa	inies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	CASEY KRIV	OR P.O. BOX 2512	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Carol Thompson	Date: 05/02/2017				
W 165440		Name (type or print): Carol Thompson	Title: Manager				
Processed 05/02/2017	* Electronically provided signatures are accepted as original signatures.						