No. W 159021		Annual Report Form 1. Mailing Address: Correct in this box if needed. GILMAR VENTURES, LLC 3402 EDDYVILLE RD HARRISON ID 83833		2.	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					H JAMES MAGNUSON 1250 NORTHWOOD CENTER CT COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*			
700 80 0	es: Enter Nar Name	mes and Addresses of a	at least one Member or Manager. Street or PO Address		City	State	Country	Postal Code
MEMBER SHAYNE GIL		MAR	624 B 5TH ST SOUTH ALBERTA		ETHBRIDGE	Jace	CANADA	T1J2C2
5. Organized Under the Laws of: ID W 159021		6. Annual Report must be signed.* Signature: H. James Magnuson Name (type or print): H. James Magnuson					11/28/2016 Agent	
Processed 11/28/2016 * Electronically provided signatures are accepted as original signatures.								