No. W 88387 Return to:		Due no later than Nov 30, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX) MAUREEN BRETT			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. DEAD BEE, LLC MAUREEN B BRETT 240 S 10TH E MOUNTAIN HOME ID 83647 240 S 10TH E MOUNTAIN HOME ID 83647 3. New Registered Agent Signature:*					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compani	ies: Enter Nar	nes and Addresses of at	least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MANAGER	MAUREEN B.	BRETT	240 S. 10TH E.	MT. HOME	ID	USA	83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 88387		Signature: Maureen	Date: 09/29/2016				
		Name (type or print)	Title: Manager				
Processed 09/29/2016 * Electronically provided signatures are accepted as original signatures.							