No. **W 181647**	**Due no later than Apr 30, 2018** **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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** COXWORKS, LLC. KRISTIN COX 3915 W CLEMENT RD BOISE ID 83704	KRISTIN COX 3915 W CLEMENT RD BOISE ID 83704-8370 3. New 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	KRISTIN COX	3915 W CLEMENT RD	BOISE	ID	USA	83704

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 181647**	Signature: Kristin Cox Name (type or print): Kristin Cox	Date: 02/26/2018 Title: Member

Processed 02/26/2018

* Electronically provided signatures are accepted as original signatures.