No. W 132616  Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080			2. Registered Agent and Office (NOT A P.O. BOX) ROBERT KARPE 100 YOUNG RD KAMIAH ID 83536	
4. Limited Liability	Compa	anies: Enter Names and Addresses of Managers	s OR Members.	See Instructions.
Manager or Member	, N	ame Street or PO Address City PHKARPE (COYOUNG RD KAU	State Cour	ntry Postal Code
Manager ☐ Member 1 K	ODE	rtrarpe 100 you make pain	nialt II	83536
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5. Organized Under the La	ws of:	6.	<del></del>	
IDAHO		Signature Der Karly		Date: 10-19-15
W 132616		Name (type or print):		Title:
		KOBERT KARPE		MEMBER
Issued 10/13/2015 by SLD				10168
INS	ΓRUC	TIONS FOR THE IDAHO ANNUAL	L REPORT	FORM
Block 1: Entity name ma correct mailing address is no corrected address must be	ot given	e altered through the use of this form. Pay special in Block 1, strike it out and write in the correct addres lock 1.	ll attention to the ss. <b>Note: T</b> o ensu	mailing address. If the re future mailings, the
<b>Block 2:</b> To change the reg of the registered agent mus	jistered a t be at a	agent or office, strike the incorrect information and wr street address in Idaho, <b>not a Post Office Box or F</b>	ite in the correct i Personal Mail Bo	nformation. <b>Note:</b> The office
Block 3: Only a <u>new</u> regist	ered age	ent must sign in Block 3.		
company. <b>Note: <u>DO NOT</u> p</b>	out "san	Manager. Enter names and business addresses of ma ne as last year" or "same as above". These will r more space is needed please add an attachment.	nagers or membe not be accepted	ers of the limited liability . Changes here will not
Block 5: May not be altered				
<b>Block 6:</b> The annual report the signer below the signat.	must be ire.	signed by a person authorized to represent the limite	ed liability compan	y. Print or type the name of
** The image of this form	n will b	e available on the internet once it has been file	d. DO <u>NOT</u> enter	Social Security numbers
If the limited liability compa website at www.sos.idaho.g	ny is no lov. How	longer doing business in Idaho, you may file the apprever, if no timely annual report is filed, administrative	opriate form. Forn action will be take	ns are available on the en, at no cost to the limited

POSTMARK DATES WILL NOT BE ACCEPTED

liability company to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections?