

No. W 170646	Due no later than Aug 31, 2018 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MARY M THOMAS 3368 N LAKEHARBOR LN R-103 BOISE ID 83703 5840 N. Collister Dr Boise, ID 83703	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. KOLOR ME KAHLUA LLC 3368 N LAKEHARBOR LN R-103 BOISE ID 83703		3. New Registered Agent Signature.	
NO FILING FEE IF RECEIVED BY DUE DATE				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager <input type="checkbox"/> Member <input type="checkbox"/>	Name <i>Mary M Thomas</i>	Street or PO Address <i>5840 N. Collister Dr, Boise, ID 83703</i>	City	State
Manager <input type="checkbox"/> Member <input type="checkbox"/>	<i>Stacey Semarco Marcelli</i>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>	<i>5840 N. Collister Dr Boise, ID 83703</i>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
5. Organized Under the Laws of: IDAHO W 170646		6. Signature: 	Name (type or print): _____ Date: <i>W/2/17</i> Title: _____	

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