No. W 142324 Return to:		Due no later than Sep 30, 2018 Annual Report Form		-	2. Registered Agent and Address (NO PO BOX) HEAHTER PARKER 5727 VEIL DR AMMON ID 83406 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KMA ENTERPRISES, LLC HEATHER J PARKER 5727 VEIL DR AMMON ID 83406 USA						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	Cit	ty	State	Country	Postal Code
MANAGER	HEATHER J	PARKER	5727 VEIL DR.	AN	MON	ID	USA	83406
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Heather Parker			Date: 07/31/2018			
W 142324		Name (type or print): Heather Parker			Title: Manager			
Processed 07/31/2018 * Electronically provided signatures are accepted as original signatures.								