No. W 155127 Return to:		Due no later than Aug 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. AGOGE, LLC KODEY SEIGFREID PO BOX 700 HAILEY ID 83333			2. Registered Agent and Address (NO PO BOX) KODEY SEIGFREID 410 NORTH MAIN ST HAILEY ID 83333 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				410 NORT HAILEY II				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	IBER KODEY SEIGFREID		PO BOX 700	HAILEY	ID	USA	83333	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Sandy Kelly			Date: 08/24/2017			
W 155127		Name (type or print): Sandy Kelly			Title: CPA			
Processed 08/24/2017 * Electronically provided signatures are accepted as original signatures.								