No. W 130187		Due no later than Oct 31, 2017	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed.		KYLE STEVENS 1143 MIDWAY			
		SO PERLA LLC KYLE STEVENS 39 PROFESSIONAL PLAZA REXBURG ID 83440	AMMON ID 83406 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		NO. SORIO					
4. Limited Liability Comp	anies: Enter Nar	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER KYLE STEVE		NS 1143 MIDWAY	AMMON	ID	USA	83406	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
110		Signature: KYLE STEVENS		Date: 08/22/2017			
W 130187		Name (type or print): KYLE STEVENS		Title: MEMBER			
Processed 08/22/2017 * Electronically provided signatures are accepted as original signatures.							