

No. W 24437		Due no later than May 31, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KODIAK LLC NEIL L STODDARD 1536 E 400 N ST ANTHONY ID 83445		NEIL L STODDARD 1536 E 400 N ST ANTHONY ID 83445			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	NEIL L STODDARD	1536 E 400 N	ST ANTHONY	ID	83445		
MANAGER	SHELLE L STODDARD	1536 E 400 N	ST ANTHONY	ID	83445		
5. Organized Under the Laws of: ID W 24437		6. Annual Report must be signed.* Signature: Shelle Stoddard Name (type or print): Shelle Stoddard Date: 04/24/2018 Title: manager					
Processed 04/24/2018 * Electronically provided signatures are accepted as original signatures.							