No. W 175094		Due no later than Dec 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		KATIE BAUCOM				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CUSTOMER EXPERIENCE CONSULTATION LLC KATIE BAUCOM 2600 S ROYAL MEADOWS DR NAMPA ID 83686			2600 S ROYAL MEADOWS DR NAMPA ID 83686-8368 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresse	es of at least one Member or Manager	.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	KATIE RUTH	I BAUCOM	2600		NAMPA	ID	USA	83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Katie Baucom			Date: 01/21/2018			
W 175094		Name (type or print): Katie Baucom			Title: President & CEO			
Processed 01/21/2018 * Electronically provided signatures are accepted as original signatures.								