No. **W 53320**	**Due no later than Aug 31, 2016**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** K & N ASKER, LLC KEVIN M ASKER 415 W MAIN ST GRANGEVILLE ID 83530-1446	KEVIN M ASKER 415 W MAIN ST GRANGEVILLE ID 83530-1446 3. New 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	KEVIN M ASKER	123 W SOUTH 2ND ST	GRANGEVILLE	ID	USA	83530
MANAGER	NANCY M ASKER	123 W SOUTH 2ND ST	GRANGEVILLE	ID	USA	83530

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 53320**	Signature: Kevin M Asker	Date: 06/24/2016
	Name (type or print): Kevin M Asker	Title: Manager

Processed 06/24/2016

* Electronically provided signatures are accepted as original signatures.