

|  |               |   |           |   |         |                      |  |
|--|---------------|---|-----------|---|---------|----------------------|--|
| No. <b>W 83468</b>   |               | <b>Due no later than Apr 30, 2018</b>   |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>          |         |                      |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>1. Mailing Address: Correct in this box if needed.</b><br>KEVI ENTERPRISES, LLC<br>VICKI JEAN HOBBS<br>3620 SUMMIT DRIVE<br>POCATELLO ID 83201 |           | VICKI JEAN HOBBS<br>3620 SUMMIT DRIVE<br>POCATELLO ID 83201 |         |                      |  |
|  |               |   |           | 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  | VICKI J HOBBS | 3620 SUMMIT DRIVE   | POCATELLO | ID  | USA     | 83201                |  |
| 5. Organized Under the Laws of:  |               | 6. Annual Report must be signed.*   |           |   |         |                      |  |
| <b>ID<br/>W 83468</b>  |               | Signature: VICKI HOBBS  |           |   |         | Date: 03/18/2018     |  |
|  |               | Name (type or print): VICKI HOBBS   |           |   |         | Title: MANAGER/OWNER |  |
| Processed 03/18/2018   |               | * Electronically provided signatures are accepted as original signatures.   |           |   |         |                      |  |