No. W 21610		Due no later than Nov 30, 2017		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SHAWNA BENEDICT 825 S CAPITOLA WAY BOISE ID 83712-8371			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.						
		CENTER FOR DIGITAL INTELLIGENCE LLC 825 S CAPITOLA WAY BOISE ID 83712 USA		BOISE ID	DOIDE ID 03/12-03/1			
				3. <u>New</u> Registe	3. New Registered Agent Signature:*			
4. Limited Liability Co	mpanies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MEMBER			825 S 825 S CAPITOLA WAY	BOISE BOISE	ID ID	USA	83712 83712	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Shawna		1	Date: 11/09/2017			
W 21610		Name (type or print): Shawna		-	Title: Manager			
Processed 11/09/201	7	* Electronically prov	rided signatures are accepted as origin	nal signatures.				