

|  |                 |   |         |  |                     |
|--|-----------------|---|---------|--|---------------------|
| No. <b>W 54970</b>   |                 | <b>Due no later than Oct 31, 2015</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>Annual Report Form</b>   |         | RONALD KINVILLE<br>1480 W. 5500 S.<br>REXBURG ID 83440 |                     |
|  |                 | <b>1. Mailing Address: Correct in this box if needed.</b>                       |         |  |                     |
|  |                 | KINVILLE ENTERPRISES LLC<br>RON KINVILLE<br>1480 W. 5500 S.<br>REXBURG ID 83440 |         | 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  | RONALD KINVILLE | 1480 W. 5500 S.   | REXBURG | ID   | 83440               |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.*   |         |  |                     |
| <b>ID<br/>W 54970</b>  |                 | Signature: Ron Kinville   |         | Date: 10/06/2015                                       |                     |
|  |                 | Name (type or print): Ron Kinville  |         | Title: manager   |                     |
| Processed 10/06/2015   |                 | * Electronically provided signatures are accepted as original signatures.       |         |  |                     |