

No. <b>W 174333</b>		<b>Due no later than Nov 30, 2017</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  KALILEI VACATIONS LLC ALAN ESKELSEN 3590 BRIAR CREEK LANE AMMON ID 83406		LEGALCORP SOLUTIONS LLC 800 W MAIN ST STE 1460 BOISE ID 83702			
				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	
MEMBER	ALAN ESKELSEN	3590 BRIAR CREEK LANE	AMMON	ID	USA	83406	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 174333</b>		Signature: Alan Eskelsen				Date: 02/28/2018	
		Name (type or print): Alan Eskelsen				Title: Owner	
Processed 02/28/2018		* Electronically provided signatures are accepted as original signatures.					