

|                                                                                                                                                        |               |                                                                                                                                   |      |                                                           |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------|------|-----------------------------------------------------------|---------|------------------|--|
| No. <b>C 99935</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>1. Mailing Address: Correct in this box if needed.</b><br>KAGEY COMPANY<br>KIKI MILLER<br>1048 N 3RD<br>COEUR D'ALENE ID 83814 |      | KIKI MILLER<br>3555 FERNAN HILL<br>COEUR D'ALENE ID 83814 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                   |      | 3. <u>New</u> Registered Agent Signature:*                |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |               |                                                                                                                                   |      |                                                           |         |                  |  |
| Office Held                                                                                                                                            | Name          | Street or PO Address                                                                                                              | City | State                                                     | Country | Postal Code      |  |
| PRESIDENT                                                                                                                                              | KIKI J MILLER | 1048 N. 3RD ST.                                                                                                                   | CDA  | ID                                                        | USA     | 83814-8381       |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                 |      |                                                           |         |                  |  |
| <b>ID<br/>C 99935</b>                                                                                                                                  |               | Signature: Kiki j Miller                                                                                                          |      |                                                           |         | Date: 10/28/2015 |  |
|                                                                                                                                                        |               | Name (type or print): Kiki j Miller                                                                                               |      |                                                           |         | Title: President |  |
| Processed 10/28/2015                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                         |      |                                                           |         |                  |  |