No. W 111609 Return to:		Due no later than Mar 31, 2015 Annual Report Form			Registered Agent and Address (NO PO BOX) KATILYN ONKES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MK VENTURES LLC KATILYN ONKES 2636 SHANNON CT IDAHO FALLS ID 83404		IDAHO FALLS	2636 SHANNON CT IDAHO FALLS ID 83404 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	ies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MEMBER	KATILYN MK VENTURES MICHAEL RON ONKES		2636 SHANNON CT 2636 SHANNON CT	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83404 83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 111609		Signature: Katilyn Onkes			Date: 04/21/2015			
		Name (type or print): Katilyn Onkes			Title: Manager			
Processed 04/21/2015 * Electronically provided signatures are accepted as original signatures.								