

No. W 17654	Due no later than Jan 31, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: 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. KATFAM, LLC LYLE LARSEN 2719 TIPPERARY LN IDAHO FALLS ID 83404		LAURIE BAIRD GAFFNEY 591 PARK AVENUE STE 201 IDAHO FALLS 83402			
			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	BERTIE KATRINA LARSEN	2719 TIPPERARY LN	IDAHO FALLS	ID		83404
MEMBER	LYLE KATRINA LARSEN	2719 TIPPERARY LN	IDAHO FALLS	ID		83404
5. Organized Under the Laws of: ID W 17654	6. Annual Report must be signed.* Signature: BERTIE KATRINA LARSEN Name (type or print): BERTIE KATRINA LARSEN		Date: 11/18/2014 Title: MEMBER			
Processed 11/18/2014		* Electronically provided signatures are accepted as original signatures.				