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|--|-----------------|---|-------|---|---------|-------------|--|
| No. W 28172 | | Due no later than Jan 31, 2016 | | 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 | | Annual Report Form | | KAREN R KELLY 83 WATERFRONT DR SAGLE ID 83860 | | | |
| | | 1. Mailing Address: Correct in this box if needed. KELLY'S VAY MART, LLC KAREN R. KELLY 4156 VAY ROAD PRIEST RIVER ID 83856 USA | | 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 | RICHARD A KELLY | 83 WATERFRONT DRIVE | SAGLE | ID | USA | 83860 | |
| MEMBER | KAREN R KELLY | 83 WATERFRONT DRIVE | SAGLE | ID | USA | 83860 | |
| 5. Organized Under the Laws of: ID W 28172 | | 6. Annual Report must be signed.* Signature: Karen Kelly Name (type or print): Karen Kelly Date: 11/18/2015 Title: Registered Agent | | | | | |
| Processed 11/18/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | | |