No. W 96859		Due no later than Oct 31, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SMILES 4 KIDS, LLC 1411 FALLS AVE E #1000C TWIN FALLS ID 83301 3. New Registered Agent Signature:*						
RECEIVED BY	DUE DATE	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER MEMBER	R S4K PC		1411 FALLS AVE E #1000C 1411 FALLS AVE E #1000C 1411 FALLS AVE E #1000C	TWIN FALLS TWIN FALLS TWIN FALLS	ID ID ID	USA USA USA	83301 83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 96859		Signature: Trent Pryor Name (type or print): Trent Pryor		Date: 11/08/2017 Title: Member				
Processed 11/08/2017	!	* Electronically provided signatures are accepted as original signatures.						