No. <b>W 24437</b>	Du	Due no later than May 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	KODIAK LLC NEIL L STOD 1536 E 400 N	Annual Report Form  1. Mailing Address: Correct in this box if needed.		NEIL L STODDARD  1536 E 400 N  ST ANTHONY ID 83445  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Fote	Names and Address	es of at least one Member or Manager.					
Office Held Name	Names and Address	Street or PO Address	City	State	Country	Postal Code	
MANAGER NEIL L	STODDARD L STODDARD	1536 E 400 N 1536 E 400 N	ST ANTHONY ST ANTHONY	ID ID	,	83445 83445	
5. Organized Under the Laws of: 6. Annual Report		t must be signed.*					
ID Signature: s		elle stoddard Date: 04/28/2017					
W 24437	Name (type o	Name (type or print): shelle stoddard		Title: Manager			
Processed 04/28/2017	* Electronically p	* Electronically provided signatures are accepted as original signatures.					