

No. W 59889		Due no later than Mar 31, 2016 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		1. Mailing Address: Correct in this box if needed. MK2 LLC MARSHALL A KENNEY 2294 IONA RD IDAHO FALLS ID 83401		MARSHALL KENNEY 2294 IONA RD IDAHO FALLS ID 83401			
NO FILING FEE IF RECEIVED BY DUE DATE				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	
MANAGER	MARSHALL KENNEY	1330 ROYAL AVE	IDAHO FALLS	ID	83401		
MANAGER	MIKE KENNEY	2294 IONA RD	IDAHO FALLS	ID	83401		
5. Organized Under the Laws of: ID W 59889		6. Annual Report must be signed.* Signature: Marshall Kenney Name (type or print): Marshall Kenney Date: 02/09/2016 Title: Owner					
Processed 02/09/2016 * Electronically provided signatures are accepted as original signatures.							