No. W 157916		Due no later than Oct 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		Annual Report Form 1. Mailing Address: Correct in this box if needed. KAP TRANSCRIPTION, LLC KATHLEEN A PERRY 4285 JORDYN ST POCATELLO ID 83202		_	KATHLEEN A PERRY 4285 JORDYN ST POCATELLO ID 83202 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mos and Addrosss	os of at least one Member or Manager					
	es. Enter Nai Name	nes and Addresse	Street or PO Address		City	State	Country	Postal Code
	KATHLEEN A	PERRY	4285 JORDYN STREET		POCATELLO	AZ	USA	83202
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: Kathleen Perry				Date: 11	/16/2016	
W 157916		Name (type or print): Kathleen Perry			Title: Manager			
Processed 11/16/2016 * Electronically provided signatures are accepted as original signatures.								