

No. <b>W 62060</b>		<b>Due no later than Apr 30, 2017</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		KYLE ORME 1581 N 775 E SHELLEY ID 83274	
		<b>1. Mailing Address: Correct in this box if needed.</b> KO TOOLS LLC KYLE ORME 1581 N 775 E SHELLEY ID 83274		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	KYLE ORME	1581 N 775 E	SHELLEY	ID	83274
MANAGER	KELSIE ORME	1581 N 775 E	SHELLEY	ID	83274
5. Organized Under the Laws of:  <b>ID W 62060</b>		6. Annual Report must be signed.* Signature: Kyle Orme Name (type or print): Kyle Orme Date: 02/26/2017 Title: manager			
Processed 02/26/2017		* Electronically provided signatures are accepted as original signatures.			