

No. <b>W 28941</b>	<b>Due no later than Mar 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(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>1. Mailing Address: Correct in this box if needed.</b> SHAKA, LLC MICHAEL J SWOPE 2244 SWALLOWTAIL BOISE ID 83706		MICHAEL J SWOPE 2244 SWALLOWTAIL BOISE ID 83706			
			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	MICHAEL J SWOPE	2244 SWALLOWTAIL LANE	BOISE	ID		83706
MANAGER	MARY JANE SWOPE	2244 SWALLOWTAIL LANE	BOISE	ID		83706
5. Organized Under the Laws of:  <b>ID W 28941</b>	6. Annual Report must be signed.* Signature: Michael J Swope Name (type or print): Michael J Swope		Date: 01/24/2018 Title: Manager			
Processed 01/24/2018		* Electronically provided signatures are accepted as original signatures.				