No. W 20867		Due no later than Sep 30, 2014		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ROBERT A	ROBERT A KANTOR			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CE, LLC ROBERT A KANTOR PO BOX 1271 KETCHUM ID 83340		KETCHUM 1	460 E SUN VALLEY ROAD STE. 207 KETCHUM ID 83340 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER ROKAN PARTN		'NERS A LP	PO BOX 1271	KETCHUM	ID	USA	83340	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 20867		Signature: Rokan Partners			Date: 07/23/2014			
		Name (type or		Title: Manager				
Processed 07/23/2014 * Electronically provided signatures are accepted as original signatures.								