| No. W 178213 | | ue no later than Feb 28, 2019 | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--|---|--|---|---------|-------------|--|
| Return to: | turn to: Annual Report Form | | ADDRESS OF THE PROPERTY OF THE | KATIE MARTHENS | | | |
| SECRETARY OF STATE | 1. Mailing | 1. Mailing Address: Correct in this box if needed. | | 4079 S MILL SITE AVE BOISE ID 83716 | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | KATIE MARTHENS REAL ESTATE LLC KATIE MARTHENS 4079 S MILL SITE AVE BOISE ID 83716 | | BOISE ID | | | | |
| | | | 3. <u>New</u> Regist | 3. <u>New</u> Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: Enter N | lames and Address | ses of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER KATIE M | ER KATIE M MARTHENS 4079 MILL SITE AVE | | BOISE | ID | | 83716 | |
| 5. Organized Under the Laws of: | Organized Under the Laws of: 6. Annual Report must be signed.* | | | | | | |
| ID | Signature: Katie Marthens | | | Date: 12/29/2017 | | | |
| W 178213 | Name (type | Name (type or print): Katie Marthens | | Title: Member | | | |
| Processed 12/29/2017 | * Electronically | * Electronically provided signatures are accepted as original signatures. | | | | | |