No. W 51558	Due	Due no later than Jun 30, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to:	A	Annual Report Form		CHRISTOPHER J POULSEN				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	POULSEN SOLUT CHRISTOPHER J 1793 E 400 N	1. Mailing Address: Correct in this box if needed. POULSEN SOLUTIONS, LLC CHRISTOPHER J POULSEN 1793 E 400 N SAINT ANTHONY ID 83445		1793 E 400 N SAINT ANTHONY ID 83445 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Ente	er Names and Addresses	of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
	OPHER J POULSEN NEY M POULSEN	5893 PAISLEY CT 5893 PAISLEY CT	RIVERSIDE RIVERSIDE	CA CA	USA USA	92507 92507		
5. Organized Under the Laws of:	6. Annual Report m	6. Annual Report must be signed.*						
ID ID	Signature: Chris	Signature: Christopher Poulsen			Date: 06/11/2018			
W 51558	Name (type or p	Name (type or print): Christopher Poulsen		Title: Member				
Processed 06/11/2018	* Electronically prov	* Electronically provided signatures are accepted as original signatures.						