

No. W 133208	Due no later than Jan 31, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		KARYN KILPATRICK-SNELL 1935 N. 18TH STREET BOISE ID 83702				
	COOPALO LEARNING CENTER, LLC. KARYN KILPATRICK-SNELL 1602 WEST HAYS STREET #304 BOISE ID 83702		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	KARYN KILPATRICK-SNELL	1935 N. 18TH STREET	BOISE	ID	USA	83702	
5. Organized Under the Laws of: ID W 133208	6. Annual Report must be signed.*		Signature: Karyn Kilpatrick-Snell		Date: 12/17/2016		
		Name (type or print): Karyn Kilpatrick-Snell		Title: Owner			
Processed 12/17/2016			* Electronically provided signatures are accepted as original signatures.				