No. W 183809 Return to:		Due no later than Jun 30, 2018 Annual Report Form			2. Registered Agent and Address (NO PO BOX) DENALEE CHAPMAN				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MS STORE LLC (THE) DENALEE CHAPMAN PO BOX 50403 IDAHO FALLS ID 83405		II	391 W 14TH ST IDAHO FALLS ID 83402-8340 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compar	nies: Enter Na	mes and Addresses	s of at least one Member or Manager.						
Office Held	Name		Street or PO Address	Cit	y	State	Country	Postal Code	
MANAGER	IANAGER DENALEE CHAPMAN		391 WEST 14TH ST	ID#	AHO FALLS	ID	USA	83402	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Denalee Chapman			Date: 07/20/2018				
W 183809		Name (type or print): Denalee Chapman				Title:	Title: CEO		
Processed 07/20/2018 * Electronically provided signatures are accepted as original signatures.									