No. <b>W 64888</b>		Due no later than Jul 31, 2016		2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  KINGHORN GROUP, LLC  KAYLYNN KINGHORN  5055 CANYON CREEK  IDAHO FALLS ID 83402			BRYCE C LLOYD 408 W 280 N BLACKFOOT ID 83221  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresse	s of at least one Member or Manager					
20 20 2	Name	nes and Addresse	Street or PO Address		City	State	Country	Postal Code
MEMBER L	LORAN W KINGHORN		5055 CANYON CREEK		IDAHO FALLS	ID		83402
5. Organized Under the Laws of:  ID  W 64888		6. Annual Report must be signed.* Signature: Kaylynn Kinghorn Name (type or print): Kaylynn Kinghorn			Date: 05/24/2016 Title: Vice President			
rocessed 05/24/2016 * Electronically provided signatures are accepted as original signatures.								