

No. W 141163	Due no later than Aug 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. EKART GROUP, LLC 119 E 46TH ST 207 GARDEN CITY ID 83714	JAMES O'BRIEN 42 N GRANITE FALLS DR NAMPA ID 83651-8365	
		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
MEMBER	KATHRYN E O'BRIEN	42 N GRANITE FALLS DR	NAMPA ID USA 83651
MEMBER	JAMES A O'BRIEN	42 N GRANITE FALLS DR	NAMPA ID USA 83651
5. Organized Under the Laws of: ID W 141163	6. Annual Report must be signed.* Signature: James Date: 06/20/2017 Name (type or print): James Title: Owner		
Processed 06/20/2017		* Electronically provided signatures are accepted as original signatures.	