No. W 16156		Due no later than Aug 31, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		C T CORPORATION SYSTEM				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KEEFE COMMISSARY NETWORK, L.L.C. SHAWN FUSCO 1260 ANDES BLVD ST LOUIS MO 63132		921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Com	panies: Enter Na	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	RUSSELL W	ILLEY	1260 ANDES BLVD		ST. LOUIS	MO	USA	63132
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
MO		Signature: Shawn Fusco			Date: 08/12/2015			
W 16156		Name (type or print): Shawn Fusco			Title: Associate Counsel			
Processed 08/12/2015 * Electronically provided signatures are accepted as original signatures.								