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| No. W 168153 | | Due no later than Jun 30, 2018 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. KEEP IT REEL, L.L.C. KEITH HOFFMAN 1760 PEREGRINE DR MOUNTIAN HOME ID 83647 | | KEITH HOFFMAN 1760 PEREGRINE DR MOUNTIAN HOME ID 83647-8364 | |
| | | | | 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 | KAYLE CHRISTINE HOFFMAN | 1760 PEREGRINE DRIVE | MOUNTAIN HOME | ID | USA 83647 |
| 5. Organized Under the Laws of: ID W 168153 | | 6. Annual Report must be signed.* Signature: Kayle Hoffman Name (type or print): Kayle Hoffman Date: 04/26/2018 Title: Manager | | | |
| Processed 04/26/2018 | | * Electronically provided signatures are accepted as original signatures. | | | |