No. W 17442			2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form 1. Mailing Address: Correct in this box if needed. SAGE PARTNERS, LLC PHILIP LAULHERE 2081 BUSINESS CENTER DR #265 IRVINE CA 92612		PARACORP INCORPORATED 921 S ORCHARD ST STE G BOISE ID 83705			
SECRETARY OF STATE						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter N	ames and Addresses of at least one Member or Mana	ger.				
Office Held Name	Street or PO Address		City	State	Country	Postal Code
MANAGER PHILIP LAI	LHERE 2081 BUSINESS CENTER I	DR #265	IRVINE	CA		92612
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	6: 1 81:11:1		Date: 11/20/2017			
W 17442	Name (type or print): Philip Laulhere		Title: Manager			
Processed 11/20/2017	* Electronically provided signatures are accepted as original signatures.					