

No. W 83940		Due no later than May 31, 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		DAVE OVERMAN 440 N LARRI LEE ST POST FALLS ID 83854			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		KRALICEK SPEAKING GROUP, LLC CARRIE A KRALICEK 735 14TH AVE COOS BAY OR 97420					
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	CARRIE A KRALICEK	735 14TH AVE	COOS BAY	OR	USA	97420	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 83940		Signature: Carrie A Kralicek			Date: 05/06/2018		
		Name (type or print): Carrie A Kralicek			Title: Owner		
Processed 05/06/2018		* Electronically provided signatures are accepted as original signatures.					