

No. W 132717	Due no later than Jan 31, 2016 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. MKOL LLC LAURA L'HUILLIER 1792 NE SUMMERWIND DR MOUNTAIN HOME ID 83647		LAURA L'HUILLIER 1792 NE SUMMERWIND DR MOUNTAIN HOME ID 83647			
			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	MARY KAY NMI GRABIG	141 WOODLAND AVE	LAURIUM	MI	USA	49913
MANAGER	LAURA L L'HUILLIER	1792 NE SUMMER WIND DR	MOUNTAIN HOME	ID	USA	83647-5474
5. Organized Under the Laws of: ID W 132717	6. Annual Report must be signed.* Signature: Laura L. L'Huillier Name (type or print): Laura L. L'Huillier		Date: 12/20/2015 Title: Manager			
Processed 12/20/2015		* Electronically provided signatures are accepted as original signatures.				