

No. <b>W 135569</b>	<b>Due no later than Mar 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> MOGAL TECHNOLOGIES, LLC CASEY SUMMERS 2734 LAVENDER DR IDAHO FALLS ID 83401		CASEY SUMMERS 2734 LAVENDER DR IDAHO FALLS ID 83401-8340			
			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	CASEY SUMMERS SUMMERS	2734 LAVENDER DR	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of:  <b>ID W 135569</b>	6. Annual Report must be signed.* Signature: casey summers Name (type or print): casey summers		Date: 02/11/2018 Title: manager			
Processed 02/11/2018		* Electronically provided signatures are accepted as original signatures.				