| No. W 98247 | | Due no later than Nov 30, 2017 | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------------|---|--|---|---------|-------------|--|
| Return to: | | Annual Report Form | PAULA KAMP 509 5TH AVE STE E SANDPOINT ID 83864 3. New Registered Agent Signature:* | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. CARUSOE ENTERPRISES, LLC PAULA KAMP PO BOX 682 SANDPOINT ID 83864 | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Compa | anies: Enter Na | mes and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER PAULA KAMI | | PO BOX 682 | SANDPOINT | ID | USA | 83864 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 98247 | | Signature: Dianna Beck | Date: 09/19/2017 | | | | |
| | | Name (type or print): Dianna Beck | Title: Accountant | | | | |
| Processed 09/19/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | |