No. <b>W 175986</b>		Due no later than Dec 31, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  WR KEELER GROUP LIMITED LIABILITY COMPANY WILLIAM KEELER 6147 N GOODYEAR AVE #104 BOISE ID 83714 USA			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				6147 N GC #104 BOISE ID	BOISE ID 83714-8371			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Comp Office Held	panies: Enter Na Name	mes and Addresses of	at least one Member or Manager.  Street or PO Address	Cit.	Ctata	Country	Postal Code	
MEMBER	WILLIAM KE	FI FR	6147 N GOODYEAR AVE #104	City BOISE	State ID	Country	83714	
5. Organized Under the	Laws of:	6. Annual Report mu	st be signed.*					
ID		Signature: William		Date: 11/30/2017				
W 175986		Name (type or pri		Title: Member				
Processed 11/30/2017		* Electronically provided signatures are accepted as original signatures.						