No. <b>W 184185</b>		Due no later than Jun 30, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		KATRINA D ADAMS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  KEEPER OF THE BOOKS LLC  KATRINA D ADAMS  6 RAVINE DR  POCATELLO ID 83204		_	6 RAVINE DR POCATELLO ID 83204  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	nies: Enter Na	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER KATRINA ADAMS		DAMS	6 RAVINE DRIVE		POCATELLO	ID	USA	83204
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Katrina Adams			Date: 04/24/2018			
W 184185		Name (type or print): Katrina Adams			Title: Owner			
Processed 04/24/2018 * Electronically provided signatures are accepted as original signatures.								