No. W 90434		Due no later than Feb 28, 2015			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. KA.Z ENDEAVORS LLC KATHRYN BELODOFF 3209 N MOUNTAIN LN BOISE ID 83702 USA		3209 N MOI BOISE 83	KATHRYN BELODOFF 3209 N MOUNTAIN LN BOISE 83702 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE		034						
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER KATHRYN BE		ELODOFF	3209 N MOUNTAIN LANE	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 90434		Signature: Kath		Date: 01/30/2015				
		Name (type or p		Title: Member				
Processed 01/30/2015 * Electronically provided signatures are accepted as original signatures.								