No. <b>W 179075</b>		Due no later than Feb 28, 2018		2	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.  LPK MANAGEMENT LLC  LAURIE KOVAC  3849 WILLOW RIDGE DR  AMMON ID 83406			LAURIE KOVAC 3849 WILLOW RIDGE DR AMMON ID 83406  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses of at	least one Member or Manager					
Office Held	Name	nes and Addresses of at	Street or PO Address		City	State	Country	Postal Code
MANAGER LAURIE KOVAC		AC	3849 WILLOW RIDGE DR		AMMON	ID	USA	83406
5. Organized Under the Laws of:  ID  W 179075		6. Annual Report must be signed.*  Signature: Laurie kovac  Name (type or print): Laurie kovac			Date: 01/15/2018 Title: Owner			
Processed 01/15/2018 * Electronically provided signatures are accepted as original signatures.								