

No. <b>W 130430</b>	<b>Due no later than Oct 31, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<b>1. Mailing Address: Correct in this box if needed.</b>  COGWORKS LLC MARCUS NILSON 450 W REESE ST BOISE ID 83706 USA		UNITED STATES CORPORATION AGEN 950 BANNOCK ST STE 1100 BOISE ID 83702			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MANAGER	Name MARCUS RICHARD NILSON	Street or PO Address 450 W. REESE ST.	City BOISE	State ID	Country USA	Postal Code 83706
5. Organized Under the Laws of:  <b>ID</b> <b>W 130430</b>	6. Annual Report must be signed.*  Signature: Marcus Nilson Name (type or print): Marcus Nilson  Date: 10/28/2015 Title: Partner					
Processed 10/28/2015	* Electronically provided signatures are accepted as original signatures.					