No. W 173203	Due no later than Oct 31, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		NORMAN KRA	NORMAN KRAMER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.			1986 MONTICELLO DR IDAHO FALLS ID 83404			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ARTIST EASEL COMPANY, LLC NORMAN KRAMER 1986 MONTICELLO DR		IDANO FALLS	IDANO FALLS ID 65404			
	IDAHO FALLS ID 83404		3. <u>New</u> Registere	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER NORMAN ALLEN KRAMER 1986 MONTICELLO DR		1986 MONTICELLO DRIVE	IDAHO FALLS	ID	USA	83404-6439	
6. Annual Report must be signed.*							
ID	ID Signature: Norman Kramer			Date: 08/28/2017			
W 173203	Name (type or p		Title: Manager				
Processed 08/28/2017	* Electronically provided signatures are accepted as original signatures.						