No. W 159726		Due no later than Dec 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form 1. Mailing Address: Correct in this box if needed. MACT ENERGY ASSURANCE SERVICES, LLC NORMAN R RICKS 3654 ELLENDALE CIRCLE IDAHO FALLS ID 83406-4749 USA		NORMAN R RICKS 3654 ELLENDALE CIR AMMON ID 83406 3. New Registered Agent Signature:*			
SECRETARY OF STATE	1. Mai						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	NORMA						
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: En	ter Names and Ad	dresses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	N RICKS	296 MORNING GLORY LANE	SANDPOINT	ID	USA	83864	
MANAGER NORM	AN R RICKS	3654 ELLENDALE CIRCLE	IDAHO FALLS	ID	USA	83406-4749	
5. Organized Under the Laws of:	6. Annual	6. Annual Report must be signed.*					
ID	Signatu	Signature: Norman R. Ricks Date: 12/19/2017					
W 159726	Name (Name (type or print): Norman R. Ricks Title: Manager					
Processed 12/19/2017	* Electroni	* Electronically provided signatures are accepted as original signatures.					