No. W 593		Due no later than Oct 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	CONTRACTOR OF ACCOUNT AND ACCOUNT	M TENGRA			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. ENKAY ENTERPRISES (US), L.L.C. KHURSHED M TENGRA 6107 GRANDJEAN PL BOISE ID 83709-3132		6107 GRANDJEAN PL BOISE ID 83709-3132			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	KHURSHED						
	BOISE ID 8			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: Enter	Names and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER KHURSHE	D M TENGRA	6107 GRANDJEAN PL	BOISE	ID	USA	83709-3132	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: I	Signature: Khurshed M. Tengra Date: 09/05/2018					
W 593	Name (type	Name (type or print): Khurshed M. Tengra Title: Manager					
Processed 09/05/2018	* Electronically	* Electronically provided signatures are accepted as original signatures.					