No. **W 17442**	**Due no later than Dec 31, 2016** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** SAGE PARTNERS, LLC PHILIP LAULHERE 2081 BUSINESS CENTER DR #265 IRVINE CA 92612	PARACORP INCORPORATED 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*

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	PHILIP LAULHERE	2081 BUSINESS CENTER DR #265	IRVINE	CA		92612

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 17442**	Signature: Philip Laulhere	Date: 11/17/2016
	Name (type or print): Philip Laulhere	Title: Manager

Processed 11/17/2016

* Electronically provided signatures are accepted as original signatures.