No. W 24499		Due no later than Jun 30, 2014 Annual Report Form		2. Registered	Registered Agent and Address (NO PO BOX) TERENCE MICHAEL NILAND 521 CREEKSIDE PL NAMPA ID 83686 3. New Registered Agent Signature:*			
Return to:								
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KEVCOL, LLC TERENCE M NILAND 521 CREEKSIDE PL NAMPA ID 83686		NAMPA ID				
NO FILING FEE IF RECEIVED BY DUE DATE		USA		or <u>r.u</u> regist	ioi ou rigonic o	.9.14441 01		
4. Limited Liability Compan	ies: Enter Nar	nes and Addresses of a	it least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER MEMBER	TERENCE MICHAEL NILAND KEVIN C NILAND COLIN M NILAND		521 CREEKSIDE PL 521 CREEKSIDE PL 521 CREEKSIDE PL	Nampa Nampa Nampa	ID ID ID	USA USA USA	83686 83686 83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 24499		Signature: Mike Niland			Date: 04/14/2014			
		Name (type or print): Mike Niland			Title: Pres/CEO			
Processed 04/14/2014	Processed 04/14/2014 * Electronically provided signatures are accepted as original signatures.							