No. **W 154670**	**Due no later than Aug 31, 2017** **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.** KEEGAN SUMMER SALES, LLC KEEGAN MUIR 245 E 2ND S REXBURG ID 83440 USA	KEEGAN MUIR 245 E 2ND S REXBURG ID 83440 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	KEEGAN J MUIR	245 E 2ND S	REXBURG	ID	USA	83440

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 154670**	Signature: Keegan Muir	Date: 07/30/2017
	Name (type or print): Keegan Muir	Title: Account Holder

Processed 07/30/2017

* Electronically provided signatures are accepted as original signatures.