

No. W 78187	Due no later than Oct 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. ENFLUID, LLC AARON D KING 2970 E SHADOWWOLF DR EAGLE ID 83616 USA		INCorp SERVICES, INC. 1524 S VISTA AVE STE 12 BOISE ID 83705			
			3. <u>New</u> 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	AARON D KING	2970 E SHADOWWOLF DR	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID W 78187	6. Annual Report must be signed.* Signature: Aaron King Name (type or print): Aaron King		Date: 10/06/2016 Title: Owner			
Processed 10/06/2016		* Electronically provided signatures are accepted as original signatures.				