| No. W 135734 Return to: | | Due no later than Mar 31, 2017 Annual Report Form | 2. Registered Agent and Address (NO PO BOX) BROOKE HIX | | | |
|--|--|---|--|----------|------------|----------------|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. K.O. PLUMBING LLC BROOKE HIX 3024 MADELINE CT IDAHO FALLS ID 83406 | 3024 MADELINE CT IDAHO FALLS ID 83406 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | |
| 4. Limited Liability Compar | nies: Enter Nar | mes and Addresses of at least one Member or Manager. | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| MEMBER MEMBER | BROOKE L F BEN R HIX | HIX 3024 MADELINE CT 3024 MADELINE CT | IDAHO FALLS IDAHO FALLS | ID ID | USA USA | 83406 83406 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | |
| ъ | | Signature: Brooke Hix | Date: 04/28/2017 | | | |
| W 135734 | | Name (type or print): Brooke Hix | Title: member | | | |
| Processed 04/28/2017 | sed 04/28/2017 * Electronically provided signatures are accepted as original signatures. | | | | | |