No. W 4826 Return to:		Due no later than Oct 31, 2015 Annual Report Form	2. Registered Agent and Address (NO PO BOX) LYNN KRANTZ 1592 DELMAR CIRCLE IDAHO FALLS ID 83404 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KRAYLOR, L.L.C. LYNN KRANTZ 1592 DELMAR CIRCLE IDAHO FALLS ID 83404				
NO FILING FEE IF RECEIVED BY DUE DATE						
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
MEMBER MEMBER	LYNN KRANT JEFF KRANT		IDAHO FALLS IDAHO FALLS	ID ID		83404 83404
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Lynn Krantz	Date: 08/19/2015			
W 4826		Name (type or print): Lynn Krantz	Title: Member			
Processed 08/19/2015	9/2015 * Electronically provided signatures are accepted as original signatures.					