| No. C 191101 | | D | ue no later than May 31, 2014 | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---------------------------------|--|----------------------------------|---------------------------|---|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. ELEMENT HEATING & COOLING, INC. JUSTIN L BOHRN 347 LOCUST ST S TWIN FALLS ID 83301 | | 905 SHOSHOI TWIN FALLS | TIMOTHY J STOVER 905 SHOSHONE ST N TWIN FALLS ID 83301 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine | | USA | | | | | | |
| Office Held Name | | ess Addi esses e | Street or PO Address | City | State | Country | Postal Code | |
| | BOBBI J BOHRN JUSTIN L BOHRN | | 1644 MAPLE AVE 1644 MAPLE AVE | TWIN FALLS TWIN FALLS | ID ID | USA USA | 83301 83301 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID C 191101 | | Signature: Justin Bohrn | | | Date: 03/21/2014 | | | |
| | | Name (type | or print): Justin Bohrn | | Title: Owner | | | |
| Processed 03/21/2014 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |