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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 121044</b>                                                                                                                                    |              | <b>Due no later than Jan 31, 2018</b>                                                                                                   |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>                  |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |              | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>GARDNER PROPERTY MANAGEMENT, LLC<br>PO BOX 1761<br>NAMPA ID 83653-1761 |       | JEFF GARDNER<br>5680 E. FRANKLIN RD.<br>SUITE 100<br>NAMPA ID 83617 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                         |       | 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                                                                                                                                                | JEFF GARDNER | PO BOX 1761                                                                                                                             | NAMPA | ID                                                                  | USA     | 83653-1761  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 121044</b>                                                                                          |              | 6. Annual Report must be signed.*<br>Signature: Jeff Gardner<br>Name (type or print): Jeff Gardner                                      |       |                                                                     |         |             |  |
| Date: 11/29/2017<br>Title: Manager                                                                                                                     |              |                                                                                                                                         |       |                                                                     |         |             |  |
| Processed 11/29/2017                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                               |       |                                                                     |         |             |  |