| No. <b>W 57620</b>   |      | Due no later than Dec 31, 2017  |                      | 2. Registered A | 2. Registered Agent and Address (NO PO BOX)                                |         |             |  |
|--|------|---|----------------------|-----------------|--|---------|-------------|--|
| Return to:   |      | Annual Report Form  |                      | JULIE ANN (     | JULIE ANN CLOUD  |         |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |      | 1. Mailing Address: Correct in this box if needed.  CLOUD & COMPANY, LLC  JULIE ANN CLOUD  612 S 1ST ST W  HOMEDALE ID 83628-3438 |                      | HOMEDALE 1      | 612 S 1ST ST W HOMEDALE ID 83628-3438  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |      | USA   |                      |                 |  |         |             |  |
| 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 JULIE ANN CLOUD   |      | 612 S 1ST ST W  | HOMEDALE             | ID              | USA  | 83628   |             |  |
| 5. Organized Under the Laws of:  |      | 6. Annual Report must be signed.*   |                      |                 |  |         |             |  |
| ID   |      | Signature: Julie Cloud  |                      |                 | Date: 11/28/2017   |         |             |  |
| W 57620  |      | Name (type or print): Julie Cloud   |                      |                 | Title: Owner   |         |             |  |
| Processed 11/28/2017 * Electronically provided signatures are accepted as original signatures. |      |   |                      |                 |  |         |             |  |