| No. W 18169 | | Due no later than Feb 28, 2017 | 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. LADDER-MAX LLC JOHN NOBLE 11916 REED RD HAYDEN ID 83835 | JOHN NOBLE 11916 REED RD HAYDEN ID 83835 3. New Registered Agent Signature:* | | | | |
| 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 | |
| MANAGER | JOHN NOBLE | 2900 GOVERNMENT WAY | COEUR D'ALENE | ID | | 83815 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: John Noble Date: 03/22/2017 | | | | | |
| W 18169 | | Name (type or print): John Noble | Title: Manager | | | | |
| Processed 03/22/2017 | rocessed 03/22/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | |