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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------|---------------------|
| No. <b>W 94568</b>                                                                                                                                     |                   | <b>Due no later than Jul 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>JOHNSTON-ELLIS, LLC<br>RHONDA MCCRAE ELLIS<br>606 BURRELL DR<br>LEWISTON ID 83501 |          | RHONDA ELLIS<br>606 BURRELL DR<br>LEWISTON ID 83501 |                     |
|                                                                                                                                                        |                   |                                                                                                                                                                                     |          | 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 |
| MEMBER                                                                                                                                                 | MICHAEL RAY ELLIS | 606 BURRELL DR.                                                                                                                                                                     | LEWISTON | ID                                                  | USA 83501           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 94568</b>                                                                                           |                   | 6. Annual Report must be signed.*<br>Signature: Rhonda Ellis<br>Name (type or print): Rhonda Ellis<br>Date: 06/03/2018<br>Title: Agent                                              |          |                                                     |                     |
| Processed 06/03/2018                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                           |          |                                                     |                     |