| No. W 81656 | | Due no later than Feb 28, 2018 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|--------|---|----------------------|---|---|-------|---------|-------------|
| Return to: | | Annual Report Form | | | JACK T RIGGS | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. PITA PIT NORTH CAROLINA, LLC JACK T RIGGS, MD 505 E. FRONT AVENUE | | | 505 E. FRONT AVENUE COEUR D'ALENE ID 83814 | | | |
| | | | | | | | | |
| | | 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 Nam | е | | Street or PO Address | | City | State | Country | Postal Code |
| MANAGER JACK | T. RIC | GGS, MD | 505 E. FRONT AVENUE | | COEUR D'ALENE | ID | USA | 83814 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 81656 | | Signature: Robert J. Fasnacht Date: 01/16/2018 | | | | | | |
| | | Name (type or print): Robert J. Fasnacht | | | Title: Authorized Agent | | | |
| Processed 01/16/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |