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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 172866</b>                                                                                                                                    |                | <b>Due no later than Oct 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>TLC OSPREY, LLC<br>STEPHEN J MARTIN<br>PMB3119 311 VILLAGE DR<br>TAMARACK ID 83615 |          | STEPHEN J MARTIN<br>311 VILLAGE DR<br>TAMARACK ID 83615 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                 |          | 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                                                                                                                                                | STEPHEN MARTIN | 311 VILLAGE DR.                                                                                                                                 | TAMARACK | ID                                                      | USA     | 83615       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 172866</b>                                                                                              |                | 6. Annual Report must be signed.*<br>Signature: StephMartn<br>Name (type or print): StephMartn<br>Date: 09/06/2018<br>Title: Manager            |          |                                                         |         |             |  |
| Processed 09/06/2018                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                       |          |                                                         |         |             |  |