

|                                                                                                                                                        |                      |                                                                                                                                                             |        |                                                            |         |                                   |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------------------------------------------------------------|---------|-----------------------------------|--|
| No. <b>W 87584</b>                                                                                                                                     |                      | <b>Due no later than Oct 31, 2014</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>NORTHWEST BUSINESS SOLUTIONS LLC<br>KATHLEEN J HENDERSON<br>9592 MACIE LOOP<br>HAYDEN ID 83835 |        | KATHLEEN J HENDERSON<br>9592 MACIE LOOP<br>HAYDEN ID 83835 |         |                                   |  |
|                                                                                                                                                        |                      |                                                                                                                                                             |        | 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                                                                                                                                                 | KATHLEEN J HENDERSON | 9592 MACIE LOOP                                                                                                                                             | HAYDEN | ID                                                         | USA     | 83835                             |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 87584</b>                                                                                           |                      | 6. Annual Report must be signed.*<br>Signature: Kathleen J Henderson<br>Name (type or print): Kathleen J Henderson                                          |        |                                                            |         | Date: 08/22/2014<br>Title: Member |  |
| Processed 08/22/2014                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                                   |        |                                                            |         |                                   |  |