

|  |                   |  |       |  |         |                         |  |
|--|-------------------|--|-------|--|---------|-------------------------|--|
| No. <b>W 166655</b>  |                   | <b>Due no later than May 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><br>BRAD & BEVERLY FRIEND TRUST, LLC<br>BRAD R. FRIEND<br>127 JONES RD<br>SAGLE ID 83860-9265 |       | BRAD FRIEND<br>127 JONES RD<br>SAGLE ID 83860-9265 |         |                         |  |
|  |                   |  |       | 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   | BEVERLY D. FRIEND | 127 JONES RD.  | SAGLE | ID   | USA     | 83860-9265              |  |
| 5. Organized Under the Laws of:  |                   | 6. Annual Report must be signed.*  |       |  |         |                         |  |
| <b>ID<br/>W 166655</b>   |                   | Signature: Brad R. Friend  |       |  |         | Date: 05/06/2018        |  |
|  |                   | Name (type or print): Brad R. Friend   |       |  |         | Title: Registered Agent |  |
| Processed 05/06/2018   |                   | * Electronically provided signatures are accepted as original signatures.  |       |  |         |                         |  |