| No. W 74914 | Due no later than Jun 30, 2015 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|---|---|---|---------|-------------|--|
| Return to: | Annual Report Form | | | TIFFANI SNELLING | | | |
| SECRETARY OF STATE | 1. Mailing Address: Correct in this box if needed. | | N 17 18 18 18 18 18 18 18 18 18 18 18 18 18 | 1675 S. MAPLE GROVE RD. BOISE 83709 | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | FOUNDATION PROPERTIES, LLC TIFFANI SNELLING 1675 S. MAPLE GROVE RD. BOISE ID 83709 | | DOISE 0 | | | | |
| | | | 3. <u>New</u> Regist | 3. <u>New</u> Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | USA | | | | | | |
| 4. Limited Liability Companies: Enter N | ames and Addresse | s of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER TIFFANI SNELLING | | 1675 S MAPLE GROVE RD | BOISE | ID | | 83709 | |
| 5. Organized Under the Laws of: | Organized Under the Laws of: 6. Annual Report must be signed.* | | | | | | |
| ID | Signature: Tiffani Snelling | | | Date: 04/20/2015 | | | |
| W 74914 | Name (type or | | Title: President | | | | |
| Processed 04/20/2015 | * Electronically pr | * Electronically provided signatures are accepted as original signatures. | | | | | |