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|---|------------------------|--|--|--|-------------|----------------|----------------------|
| No. W 145090 | | Due no later than Dec 31, 2015 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. SIMMONS CIRCLE LLC. 123 N MAIN ST POCATELLO ID 83204 | | DANE SIMMONS 570 VERN ST CHUBBUCK ID 83202 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held MANAGER | Name DANE H SIMMONS | Street or PO Address 570 VERN ST | | City CHUBBUCK | State ID | Country USA | Postal Code 83202 |
| 5. Organized Under the Laws of: ID W 145090 | | 6. Annual Report must be signed.* Signature: DANE H SIMMONS Name (type or print): DANE H SIMMONS Date: 10/30/2015 Title: MANAGING MEMBER | | | | | |
| Processed 10/30/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |