

| | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------------|---------------------|
| No. W 163281 | | Due no later than Mar 31, 2017 | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. WALLACE REI, LLC RUTH J FULLWILER 9323 N GOVERNMENT WAY #306 HAYDEN ID 83835 | | RUTH J FULLWILER 212 S 11TH ST STE 5 COEUR D ALENE ID 83814 | |
| | | | | 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 | RUTH J FULLWILER | 9323 N. GOVERNMENT WAY #306 | HAYDEN | ID | USA 83835-8256 |
| 5. Organized Under the Laws of: ID W 163281 | | 6. Annual Report must be signed.* Signature: Ruth Fullwiler Name (type or print): Ruth Fullwiler Date: 03/06/2017 Title: Manager | | | |
| Processed 03/06/2017 | | * Electronically provided signatures are accepted as original signatures. | | | |