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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------|---------|------------------|--|
| No. <b>W 104135</b>                                                                                                                                    |            | <b>Due no later than Jun 30, 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>CAT HOUSE LLC (THE)<br>FAY A LENZ<br>5626 S HOLLYHOCK PL<br>BOISE ID 83716 |       | FAY LENZ<br>5626 S HOLLYHOCK PL<br>BOISE ID 83716-6956 |         |                  |  |
|                                                                                                                                                        |            |                                                                                                                                             |       | 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                                                                                                                                                | FAY A LENZ | 5626 S HOLLYHOCK PL                                                                                                                         | BOISE | ID                                                     | USA     | 83716-6956       |  |
| 5. Organized Under the Laws of:                                                                                                                        |            | 6. Annual Report must be signed.*                                                                                                           |       |                                                        |         |                  |  |
| <b>ID<br/>W 104135</b>                                                                                                                                 |            | Signature: Fay A Lenz                                                                                                                       |       |                                                        |         | Date: 09/02/2018 |  |
|                                                                                                                                                        |            | Name (type or print): Fay A Lenz                                                                                                            |       |                                                        |         | Title: manager   |  |
| Processed 09/02/2018                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                   |       |                                                        |         |                  |  |