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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 102882</b>                                                                                                                                    |               | <b>Due no later than Apr 30, 2016</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>D.J. EICH TIMBER SERVICE, LLC<br>DANIEL J EICH<br>PO BOX 151<br>COCOLALLA ID 83813 |           | HEATHER NEER<br>100 MORGAN HILL RD<br>COCOLALLA ID 83813 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                     |           | 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                                                                                                                                                 | DANIEL J EICH | PO BOX 151                                                                                                                                          | COCOLALLA | ID                                                       | USA     | 83813       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 102882</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: DANIEL J EICH<br>Name (type or print): DANIEL J EICH                                                |           |                                                          |         |             |  |
|                                                                                                                                                        |               | Date: 04/01/2016<br>Title: OWNER                                                                                                                    |           |                                                          |         |             |  |
| Processed 04/01/2016                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                           |           |                                                          |         |             |  |