

|  |              |   |          |  |                     |
|--|--------------|---|----------|--|---------------------|
| No. <b>W 30948</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>ROST FUNERAL HOME AND CREMATION SERVICES, LLC<br>JERRY L ROST<br>500 N 18TH E<br>MTN HOME ID 83647 |          | JERRY L ROST<br>500 N 18TH E<br>MTN HOME ID 83647  |                     |
|  |              |   |          | 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   | JERRY L ROST | 500 N 18TH E  | MTN HOME | ID   | 83647               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 30948</b>   |              | 6. Annual Report must be signed.*<br>Signature: Jerry Rost / lme<br>Name (type or print): Jerry Rost / lme<br>Date: 04/23/2018<br>Title: member                 |          |  |                     |
| Processed 04/23/2018   |              | * Electronically provided signatures are accepted as original signatures.   |          |  |                     |