

|                                                                                                                                                        |               |                                                                                                                                                                              |       |                                                               |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>W 129844</b>                                                                                                                                    |               | <b>Due no later than Oct 31, 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>RIDGELINERS, LLC<br>EARL G. GATES<br>2735 E MIGRATORY DR<br>BOISE ID 83706 |       | EARL GORDEN GATES JR<br>2735 E MIGRATORY DR<br>BOISE ID 83706 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                                              |       | 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                                                                                                                                                 | EARL G. GATES | 2735 E. MIGRATORY DR.                                                                                                                                                        | BOISE | ID                                                            | USA     | 83706       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 129844</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: E. Gorden Gates<br>Name (type or print): E. Gorden Gates<br>Date: 09/06/2018<br>Title: President                             |       |                                                               |         |             |  |
| Processed 09/06/2018                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                    |       |                                                               |         |             |  |