

|                                                                                                                                                        |                  |                                                                                                                                |         |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 121851</b>                                                                                                                                    |                  | <b>Due no later than Feb 28, 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>HEAVEN, LLC<br>LINDA L. WOMBOLT<br>PO BOX 458<br>KELLOGG ID 83837 |         | LINDA L WOMBOLT<br>432 MAIN ST<br>WARDNER ID 83837 |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                |         | 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                                                                                                                                                | LINDA L. WOMBOLT | P. O. BOX 458                                                                                                                  | KELLOGG | ID                                                 | USA     | 83837            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                              |         |                                                    |         |                  |  |
| <b>ID<br/>W 121851</b>                                                                                                                                 |                  | Signature: Linda L. Wombolt                                                                                                    |         |                                                    |         | Date: 01/17/2018 |  |
|                                                                                                                                                        |                  | Name (type or print): Linda L. Wombolt                                                                                         |         |                                                    |         | Title: Manager   |  |
| Processed 01/17/2018                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                      |         |                                                    |         |                  |  |