| No. W 139993 | | Due no later than Jul 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. WATERS ORGANIZATION, LLC (THE) 3355 N FIVE MILE RD STE 265 BOISE ID 83713 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|--|-------|---|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | CHAD WATERS 4872 N HICKORY TWIG BOISE ID 83713 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar | | nes and Addresses of at least one Member or Man | ager. | | | | |
| Office Held | Name | Street or PO Address | 9 | City | State | Country | Postal Code |
| MANAGER CHAD WATE | | RS 4872 N. HICKORY TWIG | | BOISE | ID | USA | 83713 |
| 5. Organized Under the Laws of: ID W 139993 | | 6. Annual Report must be signed.* Signature: Chad Waters Name (type or print): Chad Waters | | Date: 07/15/2016 Title: Manager | | | |
| Processed 07/15/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | |