| No. W 130004 | | Due no later than Oct 31, 2017 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|---|---|----------------------|---|------------------|-------|---------|-------------|
| Return to: | | Annual Report Form | | JULIE SCHNOOR | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. TWIN FALLS ENERGY BASKETBALL, LLC JULIE SCHNOOR 1901 TAMARACK LOOP TWIN FALLS ID 83301 | | 1901 TAMARACK LOOP TWIN FALLS ID 83301 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | | N 800 |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| MEMBER JULIE SCHNOO | | OOR | 1901 TAMARACK LOOP | | TWIN FALLS | ID | USA | 83301 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Julie Schnoor | | | Date: 11/21/2017 | | | |
| W 130004 | | Name (type or print): Julie Schnoor | | Title: officer | | | | |
| Processed 11/21/2017 | * Electronically provided signatures are accepted as original signatures. | | | | | | | |