

|                                                                                                                                                        |                  |                                                                                          |            |                                                         |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------|------------|---------------------------------------------------------|------------------|-------------|--|
| No. <b>W 54345</b>                                                                                                                                     |                  | <b>Due no later than Sep 30, 2016</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>                                                                |            | GARY D SLETTE<br>134 THIRD AVE E<br>TWIN FALLS ID 83301 |                  |             |  |
|                                                                                                                                                        |                  | <b>1. Mailing Address: Correct in this box if needed.</b>                                |            | 3. <u>New</u> Registered Agent Signature:*              |                  |             |  |
|                                                                                                                                                        |                  | ROBERTSON & SLETTE, P.L.L.C.<br>GARY D SLETTE<br>PO BOX 1906<br>TWIN FALLS ID 83303-1906 |            |                                                         |                  |             |  |
| 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                                                                                                                                                 | GARY D SLETTE    | PO BOX 1906                                                                              | TWIN FALLS | ID                                                      |                  | 83303-1906  |  |
| MEMBER                                                                                                                                                 | J EVAN ROBERTSON | PO BOX 1906                                                                              | TWIN FALLS | ID                                                      | USA              | 83303-1906  |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                        |            |                                                         |                  |             |  |
| <b>ID<br/>W 54345</b>                                                                                                                                  |                  | Signature: J Evan Robertson                                                              |            |                                                         | Date: 09/29/2016 |             |  |
|                                                                                                                                                        |                  | Name (type or print): J Evan Robertson                                                   |            |                                                         | Title: Member    |             |  |
| Processed 09/29/2016                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                |            |                                                         |                  |             |  |