| No. <b>C 200548</b>  |   | Due no later than Dec 31, 2015  |                            | 2. Registered Agent and Address (NO PO BOX)  |                  |             |  |
|--|---|---|----------------------------|--|------------------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | WSD LEGAL<br>WESTON S<br>490 MEMOR      |   | 490 MEMORIA<br>IDAHO FALLS | WESTON S DAVIS 490 MEMORIAL DR IDAHO FALLS ID 83402  3. New Registered Agent Signature:* |                  |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |   |                            |  |                  |             |  |
| 4. Corporations: Enter Names and Bu  | siness Addresses o                      | of President, Secretary, and Directors. Treas                             | urer (optional).           |  |                  |             |  |
| Office Held Name   |   | Street or PO Address  | City                       | State  | Country          | Postal Code |  |
| PRESIDENT WESTON   | S DAVIS                                 | 490 MEMORIAL DRIVE  | IDAHO FALLS                | ID   | USA              | 83402       |  |
| 5. Organized Under the Laws of: 6. Annual Report must be signed.*                  |   |   |                            |  |                  |             |  |
| l no   | Signature: \                            | Signature: Weston S. Davis  |                            |  | Date: 12/31/2015 |             |  |
| C 200548   | 8 Name (type or print): Weston S. Davis |   | Title:                     | Title: Registered Agent  |                  |             |  |
| Processed 12/31/2015   | * Electronically                        | * Electronically provided signatures are accepted as original signatures. |                            |  |                  |             |  |