

|  |               |  |       |   |         |             |  |
|--|---------------|--|-------|---|---------|-------------|--|
| No. <b>W 170625</b>  |               | <b>Due no later than Aug 31, 2017</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><br>NYMAN & PICCARD LLC<br>FRANK KRONE<br>967 E PARKCENTER #233<br>BOISE ID 83706 |       | FRANK KRONE<br>1410 CHELSEY CIR<br>MOUNTAIN HOME ID 83647 |         |             |  |
|  |               |  |       | 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 |  |
| MEMBER   | KAREN KRONE   | 967 E PARKCENTER BLVD #233   | BOISE | ID  | USA     | 83706       |  |
| MANAGER  | FRANK W KRONE | 967 E PARKCENTER BLVD #233   | BOISE | ID  | USA     | 83706       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 170625</b>  |               | 6. Annual Report must be signed.*<br>Signature: Frank Krone<br>Name (type or print): Frank Krone   |       |   |         |             |  |
| Date: 07/20/2017<br>Title: Owner   |               |  |       |   |         |             |  |
| Processed 07/20/2017   |               | * Electronically provided signatures are accepted as original signatures.  |       |   |         |             |  |