| No. C 174815 | | Du | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--------------------------------------|---|--|---|-----------|------------|----------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. AHM SUPPORT INC JOHN C BUSHNELL 1869 E SELTICE WAY #290 POST FALLS ID 83854 3. New Registered Agent Signature:* | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | nusu (astional) | (antique) | | |
| Corporations: Enter Names and Business Addres Office Held Name | | less Addresses of | Street or PO Address | City | State | Country | Postal Code |
| PRESIDENT SECRETARY | JOHN C BUSHNELL SUMMER C BUSHNELL | | 5006 E PORTSIDE CT 5006 E PORTSIDE CT | POST FALLS POST FALLS | ID ID | USA USA | 83854 83854 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Su | | Date: 08/01/2016 | | | |
| C 174815 | | Name (type o | | Title: Secretary | | | |
| Processed 08/01/2016 | | * Electronically p | rovided signatures are accepted as origina | al signatures. | | | |