

|  |                |  |         |  |                     |
|--|----------------|--|---------|--|---------------------|
| No. <b>W 73146</b>   |                | <b>Due no later than Apr 30, 2015</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>AKIDA ENTERPRISES, LLC<br>KRISTIN NELSON<br>1500 W. 4300 S.<br>REXBURG ID 83440 |         | KRISTIN NELSON<br>1500 W. 4300 S.<br>REXBURG 83440 |                     |
|  |                |  |         | 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   | KRISTIN NELSON | 1500 W. 4300 S.  | REXBURG | ID   | 83440               |
| MEMBER   | DARRIN NELSON  | 1500 W. 4300 S.  | REXBURG | ID   | 83440               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 73146</b>   |                | 6. Annual Report must be signed.*<br>Signature: Kristin Nelson<br>Name (type or print): Kristin Nelson<br>Date: 03/26/2015<br>Title: Member      |         |  |                     |
| Processed 03/26/2015   |                | * Electronically provided signatures are accepted as original signatures.  |         |  |                     |