

|                                                                                                                                                        |                 |                                                                                  |       |                                                            |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------------------------|-------|------------------------------------------------------------|------------------|-------------|--|
| No. <b>W 448</b>                                                                                                                                       |                 | <b>Due no later than Jul 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>Annual Report Form</b>                                                        |       | BRENDA J KREMPASZKY<br>8385 W EMERALD ST<br>BOISE ID 83704 |                  |             |  |
|                                                                                                                                                        |                 | <b>1. Mailing Address: Correct in this box if needed.</b>                        |       | 3. <u>New</u> Registered Agent Signature:*                 |                  |             |  |
|                                                                                                                                                        |                 | WHITE-LEASEURE L.L.C.<br>H LARRY LEASURE<br>P.O. BOX 1277<br>BOISE ID 83701-1277 |       |                                                            |                  |             |  |
| 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 |  |
| MANAGER                                                                                                                                                | H LARRY LEASURE | P.O. BOX 1277                                                                    | BOISE | ID                                                         | USA              | 83701-1277  |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                |       |                                                            |                  |             |  |
| <b>ID<br/>W 448</b>                                                                                                                                    |                 | Signature: H. Larry Leasure                                                      |       |                                                            | Date: 05/18/2017 |             |  |
|                                                                                                                                                        |                 | Name (type or print): H. Larry Leasure                                           |       |                                                            | Title: Member    |             |  |
| Processed 05/18/2017                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.        |       |                                                            |                  |             |  |