

|  |                       |  |       |   |         |                  |  |
|--|-----------------------|--|-------|---|---------|------------------|--|
| No. <b>W 157227</b>  |                       | <b>Due no later than Oct 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>ROAM, LLC<br>BRENT ROBERTS<br>225 S WOODDALE AVE #105<br>EAGLE ID 83616 |       | BRENT ROBERTS<br>225 S WOODDALE AVE #105<br>EAGLE ID 83616-8361 |         |                  |  |
|  |                       |  |       | 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   | BRENT MICHAEL ROBERTS | 225 S WOODDALE AVE #105  | EAGLE | ID  | USA     | 83616            |  |
| 5. Organized Under the Laws of:  |                       | 6. Annual Report must be signed.*  |       |   |         |                  |  |
| <b>ID<br/>W 157227</b>   |                       | Signature: Brent Roberts   |       |   |         | Date: 09/21/2017 |  |
|  |                       | Name (type or print): Brent Roberts  |       |   |         | Title: Member    |  |
| Processed 09/21/2017   |                       | * Electronically provided signatures are accepted as original signatures.  |       |   |         |                  |  |