| No. W 154819 | | | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------------------|---|-------|---|---------|-------------|--|
| Return to: SECRETARY OF STATE | 1. Mailing | | | KIMBERLY JEFFREY 3662 N SAWGRASS WAY BOISE ID 83704 | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | KIMBERLY | | | | | | |
| | | | | 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | USA | | | | | | |
| 4. Limited Liability Companies: Er | nter Names and Addre | sses of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER KIMBERLY JEFFREY | | 3662 N SAWGRASS WAY | BOISE | ID | USA | 83704 | |
| 5. Organized Under the Laws of: 6. Annual Repo | | port must be signed.* | | | | | |
| ID | Signature: | Signature: KIMBERLY JEFFREY Date: 06/20/2016 | | | | | |
| W 154819 | Name (type | Name (type or print): KIMBERLY JEFFREY Title: MANAGER | | | | | |
| Processed 06/20/2016 | * Electronically | * Electronically provided signatures are accepted as original signatures. | | | | | |