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| No. W 108534 | Due no later than Nov 30, 2017 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed. SENIOR GUEST SERVICES, LLC CLIFFORD E MORT P.O. BOX 3184 POST FALLS ID 83877 | | CLIFFORD E MORT 1950 W BELLERIVE LN B108 COEUR D ALENE ID 83814-5526 | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | 3. <u>New</u> Registered Agent Signature:* | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held MEMBER | Name CLIFFORD E MORT | Street or PO Address 1950 W BELLERIVE LN B108 | City COEUR D ALENE | State ID | Country USA | Postal Code 83814-5526 | |
| 5. Organized Under the Laws of: ID W 108534 | 6. Annual Report must be signed.* Signature: Marissa Davenport Name (type or print): Marissa Davenport | | | | | | |
| Processed 11/15/2017 | * Electronically provided signatures are accepted as original signatures. | | | | | | |