| No. <b>W 114011</b>  |               |      | Due no later than May 31, 2015   |   |        | 2. Registered Agent and Address (NO PO BOX)   |       |         |             |
|--|---------------|------|--|---|--------|---|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |               |      | Annual Report Form  1. Mailing Address: Correct in this box if needed.  1715 SOUTH JUNIPER LLC MICHAEL MCCLANE 2173 W STANSBURY EAGLE ID 83616 |   |        | GIVENS PURSLEY CORPORATE SERVI 601 W BANNOCK ST BOISE ID 83702  3. New Registered Agent Signature:* |       |         |             |
|  |               |      |  |   |        |   |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |               |      |  |   |        |   |       |         |             |
| 4. Limited Liability Comp  | oanies: Enter | Name | es and Address   | ses of at least one Member or Manager.      |        |   |       |         |             |
| Office Held  | Name          |      |  | Street or PO Address                        |        | City  | State | Country | Postal Code |
| MEMBER   | MICHAEL       | JOH  | N MCCLANE  | 2173 W. STANSBURY DRIVE                     |        | EAGLE   | ID    | USA     | 83616       |
| 5. Organized Under the Laws of:  |               | 16   | 6. Annual Report must be signed.*  |   |        |   |       |         |             |
| ID   |               |      | Signature: Michael McClane   |   |        | Date: 05/12/2015  |       |         |             |
| W 114011   |               |      | Name (type or print): Michael McClane  |   |        | Title: Owner  |       |         |             |
| Processed 05/12/2015   |               | *    | Electronically p   | provided signatures are accepted as origina | l sign | atures.   |       |         |             |