

|  |   |   |  |       |         |             |
|--|---|---|--|-------|---------|-------------|
| No. <b>W 167958</b>  | <b>Due no later than Jun 30, 2018</b><br><b>Annual Report Form</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>QUACK ATTACK RETRIEVERS LLC<br>JERRY D OLSON<br>1024 N PLAZA RD<br>EMMETT ID 83617 |   | JERRY D OLSON<br>1024 N PLAZA RD<br>EMMETT ID 83617-8361 |       |         |             |
|  |   |   | 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   | JERRY D OLSON   | 1024 NORTH PLAZA RD.  | EMMETT   | ID    | USA     | 83617       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 167958</b>  | 6. Annual Report must be signed.*<br>Signature: Jerry Olson<br>Name (type or print): Jerry Olson  |   | Date: 07/24/2018<br>Title: Owner                         |       |         |             |
| Processed 07/24/2018   |   | * Electronically provided signatures are accepted as original signatures. |  |       |         |             |