

|                                                                                                                                                        |               |                                                                                                                                                |       |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 9002</b>                                                                                                                                      |               | <b>Due no later than Jun 30, 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>SONNA GROUP, L.L.C.<br>GARY P BENOIT<br>910 MAIN ST STE 358<br>BOISE ID 83702 |       | GARY P BENOIT<br>910 MAIN ST STE 358<br>BOISE ID 83702 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                |       | 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                                                                                                                                                 | GARY P BENOIT | 910 MAIN ST., SUITE 358                                                                                                                        | BOISE | ID                                                     | USA     | 83702       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 9002</b>                                                                                            |               | 6. Annual Report must be signed.*<br>Signature: Gary Benoit<br>Name (type or print): Gary Benoit                                               |       |                                                        |         |             |  |
|                                                                                                                                                        |               | Date: 04/27/2017<br>Title: Member                                                                                                              |       |                                                        |         |             |  |
| Processed 04/27/2017                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                      |       |                                                        |         |             |  |