| No. W 24857 | | Due no later than Jun 30, 2015 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|--|---------------------------|------------------|---|---------|-------------|--|
| Return to: | | Annual Report Form | | DAVID LAN | DAVID LAMARQUE | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. LAMARQUE PROPERTIES, LLC DAVID T LAMARQUE 4379 W QUAIL POINT CT BOISE ID 83703-3845 | | BOISE 8 | 4379 W QUAIL POINT CT BOISE 83703-3845 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | | |
| 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 DAVID LAMA | | ARQUE | 4379 W QUAIL POINT CT | BOISE | ID | | 83703 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Vi | | Date: 04/20/2015 | | | | |
| W 24857 | | Name (type o | or print): Victoria Moore | | Title: Payroll | | | |
| Processed 04/20/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |