

No. W 61043		Due no later than Mar 31, 2016 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. LOWE TECHNOLOGY, LLC LORI LOWE PO BOX 1207 POST FALLS ID 83877		LORI LOWE 6143 W HARBOR DR COEUR D'ALENE ID 83814-8387			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	LORI LOWE	PO BOX 1207	POST FALLS	ID	83877		
MEMBER	MIKE LOWE	PO BOX 1207	POST FALLS	ID	83814		
5. Organized Under the Laws of: ID W 61043		6. Annual Report must be signed.* Signature: Lori A Lowe Name (type or print): Lori A Lowe					
		Date: 03/09/2016 Title: Manager					
Processed 03/09/2016 * Electronically provided signatures are accepted as original signatures.							