

|                                                                                                                                                        |               |                                                                                                                                           |       |                                                          |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------|---------|------------------|--|
| No. <b>W 17451</b>                                                                                                                                     |               | <b>Due no later than Dec 31, 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>LS & RG LLC<br>LYNN S. BUTLER<br>3970 KILARNEY DR<br>BOISE ID 83704-3329 |       | LYNN S BUTLER<br>3970 KILARNEY DR<br>BOISE ID 83704-3329 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                           |       | 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                                                                                                                                                 | LYNN S BUTLER | 3970 KILARNEY DR                                                                                                                          | BOISE | ID                                                       | USA     | 83704-3329       |  |
| MEMBER                                                                                                                                                 | ROY G BUTLER  | 3970 KILARNEY DR                                                                                                                          | BOISE | ID                                                       | USA     | 83704-3329       |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                         |       |                                                          |         |                  |  |
| <b>ID<br/>W 17451</b>                                                                                                                                  |               | Signature: Lynn S. Butler                                                                                                                 |       |                                                          |         | Date: 12/18/2017 |  |
|                                                                                                                                                        |               | Name (type or print): Lynn S. Butler                                                                                                      |       |                                                          |         | Title: Member    |  |
| Processed 12/18/2017                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                 |       |                                                          |         |                  |  |