

|                                                                                                                                                        |                  |                                                                                                                                              |             |                                                       |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------|---------|-------------|--|
| No. <b>W 158672</b>                                                                                                                                    |                  | Due no later than Nov 30, 2017                                                                                                               |             | 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>A&M LIGHTING LLC<br>ANDREW JOHNSON<br>1066 W 33 N<br>IDAHO FALLS ID 83401   |             | ANDREW JOHNSON<br>1066 W 33 N<br>IDAHO FALLS ID 83401 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                              |             | 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 |  |
| MANAGER                                                                                                                                                | ANDREW C JOHNSON | 1066 W. 33 N                                                                                                                                 | IDAHO FALLS | ID                                                    | USA     | 83401       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 158672</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Andrew Johnson<br>Name (type or print): Andrew Johnson<br>Date: 12/22/2017<br>Title: Manager |             |                                                       |         |             |  |
| Processed 12/22/2017                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                    |             |                                                       |         |             |  |