No. C 42125		Due no later than Mar 31, 2018		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			RICHARD B STIVERS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TITLEFACT, INC. RICHARD B STIVERS P.O. BOX 486 TWIN FALLS ID 93202		TWIN FALLS	163 4TH AVE. N. TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		TWIN FALLS ID 83303		3. <u>New</u> Registere	3. INC. Registered Agent Signature.			
4. Corporations: Enter Nar	mes and Busin	ess Addresses of Pro	esident, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR SECRETARY VICE PRESIDENT	RICHARD B STIVERS KATHY C EASTERDAY RUDY J ASHENBRENER		391 EDWARDS DRIVE 2491 EAST 4000 NORTH 3259 WOODRIDGE DRIVE	TWIN FALLS FILER TWIN FALLS	ID ID ID	USA USA USA	83301 83328 83301	
PRESIDENT	ROBERT TO	DD BLASS	3131 LAURELWOOD DRIVE	TWIN FALLS	ID	USA	83301-8189	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: KATH		Date: 01/23/2018				
C 42125		Name (type or print): KATHY C EASTERDAY			Title: SECRETARY			
Processed 01/23/2018 * Electronically provided signatures are accepted as original signatures.								