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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------|---------|------------------|--|
| No. <b>W 85797</b>                                                                                                                                     |                 | <b>Due no later than Jul 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>SNAKE RIVER LAW, PLLC<br>MARK R PETERSEN<br>1156 EAST CENTER<br>POCATELLO ID 83201 |           | MARK R PETERSEN<br>1156 EAST CENTER<br>POCATELLO ID 83201 |         |                  |  |
|                                                                                                                                                        |                 |                                                                                                                                                                                      |           | 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                                                                                                                                                | MARK R PETERSEN | 1156 EAST CENTER                                                                                                                                                                     | POCATELLO | ID                                                        | USA     | 83201            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                                                                    |           |                                                           |         |                  |  |
| <b>ID<br/>W 85797</b>                                                                                                                                  |                 | Signature: Mark R Petersen                                                                                                                                                           |           |                                                           |         | Date: 05/18/2017 |  |
|                                                                                                                                                        |                 | Name (type or print): Mark R Petersen                                                                                                                                                |           |                                                           |         | Title: Manager   |  |
| Processed 05/18/2017                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                            |           |                                                           |         |                  |  |