

|                                                                                                                                                        |                     |                                                                                                                                                             |        |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 147438</b>                                                                                                                                    |                     | <b>Due no later than Jan 31, 2018</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>W, INC.<br>TROY WILKINS<br>362 W 200 N<br>RUPERT ID 83350 |        | TROY WILKINS<br>362 W 200 N<br>RUPERT ID 83350     |         |             |  |
|                                                                                                                                                        |                     |                                                                                                                                                             |        | 3. <u>New</u> Registered Agent Signature: *        |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                     |                                                                                                                                                             |        |                                                    |         |             |  |
| Office Held                                                                                                                                            | Name                | Street or PO Address                                                                                                                                        | City   | State                                              | Country | Postal Code |  |
| SECRETARY                                                                                                                                              | ALISHA JANE WILKINS | 362 W. 200 N.                                                                                                                                               | RUPERT | ID                                                 | USA     | 83350       |  |
| PRESIDENT                                                                                                                                              | TROY WILKINS        | 362 W. 200 N.                                                                                                                                               | RUPERT | ID                                                 | USA     | 83350       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 147438</b>                                                                                          |                     | 6. Annual Report must be signed.*<br>Signature: Troy Wilkins<br>Name (type or print): Troy Wilkins<br>Date: 11/25/2017<br>Title: President                  |        |                                                    |         |             |  |
| Processed 11/25/2017                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                   |        |                                                    |         |             |  |