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|---|------------------------|---|--|--|-------------|----------------|----------------------|
| No. W 159861 | | Due no later than Dec 31, 2017 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. GK MASON LLC GORDON E. MASON PO BOX 962 DRIGGS ID 83422 | | GORDON E MASON 8841 AURORA DR VICTOR ID 83422 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held MEMBER | Name KARIE L. MASON | Street or PO Address PO BOX 962 | | City DRIGGS | State ID | Country USA | Postal Code 83422 |
| 5. Organized Under the Laws of: ID W 159861 | | 6. Annual Report must be signed.* Signature: Karie L. Mason Name (type or print): Karie L. Mason Date: 11/07/2017 Title: Member | | | | | |
| Processed 11/07/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | |