

No. <b>W 131302</b>	<b>Due no later than Nov 30, 2015 Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> WILLIAM JUNG 1250 S RIVER FLOW WAY EAGLE ID 83616																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> OHANA WIRELESS PARTNERS, LLC 1250 S RIVER FLOW WY EAGLE ID 83616		3. <u>New</u> Registered Agent Signature.  <i>N/A.</i>																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 5%;">State</th> <th style="width: 5%;">Country</th> <th style="width: 20%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>WILLIAM JUNG</td> <td>1250 S. River Flow WY</td> <td>EAGLE</td> <td>ID</td> <td>USA</td> <td>83616</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	WILLIAM JUNG	1250 S. River Flow WY	EAGLE	ID	USA	83616	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 131302</b> </div>	6. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <i>William Jung</i></td> <td style="width: 30%;">Date: <i>9-24-2015</i></td> </tr> <tr> <td>Name (type or print): <i>WILLIAM JUNG</i></td> <td>Title: <i>President</i></td> </tr> </table>			Signature: <i>William Jung</i>	Date: <i>9-24-2015</i>	Name (type or print): <i>WILLIAM JUNG</i>	Title: <i>President</i>																															
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