

|                                                                                                                                                        |           |                                                                                                                                                                                   |          |                                                          |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------|---------|------------------|--|
| No. <b>W 71538</b>                                                                                                                                     |           | <b>Due no later than Feb 29, 2016</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>PECO CUSTOM HOMES LLC<br>RAMO PECO<br>723 W WHITE SANDS DR<br>MERIDIAN ID 83646 |          | MEDIHA PECO<br>723 W WHITE SANDS DR<br>MERIDIAN ID 83646 |         |                  |  |
|                                                                                                                                                        |           |                                                                                                                                                                                   |          | 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                                                                                                                                                | RAMO PECO | 723 W WHITE SANDS DR                                                                                                                                                              | MERIDIAN | ID                                                       | USA     | 83646            |  |
| 5. Organized Under the Laws of:                                                                                                                        |           | 6. Annual Report must be signed.*                                                                                                                                                 |          |                                                          |         |                  |  |
| <b>ID<br/>W 71538</b>                                                                                                                                  |           | Signature: ramo peco                                                                                                                                                              |          |                                                          |         | Date: 02/01/2016 |  |
|                                                                                                                                                        |           | Name (type or print): ramo peco                                                                                                                                                   |          |                                                          |         | Title: member    |  |
| Processed 02/01/2016                                                                                                                                   |           | * Electronically provided signatures are accepted as original signatures.                                                                                                         |          |                                                          |         |                  |  |