No. C 182989		Due no later than May 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: Annu		nual Report Form		TIM CHRISTENSEN			
SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Address: Correct in this box if needed. TIM CHRISTENSEN, INC. ANGIE HARRIS 132 S. STATE PRESTON ID 83263		132 S STATE PRESTON ID	132 S STATE PRESTON ID 83263			
PO BOX 83720 BOISE, ID 83720-0080							
			3. <u>New</u> Register	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Bus	iness Addresses of Presi	dent, Secretary, and Directors. Trea	asurer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
			PRESTON	ID	USA	83263	
PRESIDENT TIMOTHY	LYNN CHRISTENSEN	132 SOUTH STATE	PRESTON	ID	USA	83263	
5. Organized Under the Laws of: 6. Annual Report mus		st be signed.*					
ID	Signature: Timothy	nature: Timothy Christensen Date: 03/20/2017					
C 182989	Name (type or print): Timothy Christensen			Title: Owner			
Processed 03/20/2017	* Electronically provided signatures are accepted as original signatures.						