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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 78324</b>                                                                                                                                     |           | <b>Due no later than Oct 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>1. Mailing Address: Correct in this box if needed.</b><br>GERMAN SHEPHERD, LLC<br>TIM J BURKE<br>PO BOX 2536<br>EAGLE ID 83616           |       | ALLAN R BOSCH<br>205 N 10TH ST 4TH FL<br>BOISE ID 83702 |         |             |  |
|                                                                                                                                                        |           |                                                                                                                                             |       | 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 |  |
| MEMBER                                                                                                                                                 | TIM BURKE | PO BOX 2536                                                                                                                                 | EAGLE | ID                                                      | USA     | 83616       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 78324</b>                                                                                               |           | 6. Annual Report must be signed.*<br>Signature: Luke Wilcomb<br>Name (type or print): Luke Wilcomb<br>Date: 08/21/2018<br>Title: Controller |       |                                                         |         |             |  |
| Processed 08/21/2018                                                                                                                                   |           | * Electronically provided signatures are accepted as original signatures.                                                                   |       |                                                         |         |             |  |