

No. W 166151		Due no later than May 31, 2018 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. STUMP SHOT LLC MITCHELL PLUID 1511 MOONSHADOW RD BONNERS FERRY ID 83805		DONNA WILSON-FUNKHOUSER 64767 HWY 2 BONNERS FERRY ID 83805			
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 LISA M. MENDENHALL-PLUID	Street or PO Address 1511 MOON SHADOW RD		City BONNERS FERRY	State ID	Country USA	Postal Code 83805
5. Organized Under the Laws of: ID W 166151		6. Annual Report must be signed.* Signature: Lisa Mendenhall-Pluid Name (type or print): Lisa Mendenhall-Pluid Date: 04/09/2018 Title: Secretary					
Processed 04/09/2018 * Electronically provided signatures are accepted as original signatures.							