

|  |                  |  |       |  |         |                  |  |
|--|------------------|--|-------|--|---------|------------------|--|
| No. <b>W 125662</b>  |                  | <b>Due no later than May 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><br>C.A. CAPITAL, LLC<br>CARTER J ANDREWS<br>5402 W FRANKLIN RD<br>BOISE ID 83705 |       | JAMES F JACOBSON<br>660 E FRANKLIN RD STE 110<br>MERIDIAN ID 83642 |         |                  |  |
|  |                  |  |       | 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  | CARTER J ANDREWS | 5402 W FRANKLIN RD.  | BOISE | ID   | USA     | 83705            |  |
| 5. Organized Under the Laws of:  |                  | 6. Annual Report must be signed.*  |       |  |         |                  |  |
| <b>ID<br/>W 125662</b>   |                  | Signature: Carter J Andrews  |       |  |         | Date: 03/19/2018 |  |
|  |                  | Name (type or print): Carter J Andrews   |       |  |         | Title: Owner     |  |
| Processed 03/19/2018   |                  | * Electronically provided signatures are accepted as original signatures.  |       |  |         |                  |  |