No. C 127635		Due no later than Feb 29, 2016			2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		NATHAN P OLSEN					
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		NATHAN NATHAN PO BOX	1. Mailing Address: Correct in this box if needed. NATHAN P. OLSEN, INC. NATHAN OLSEN PO BOX 5578 TWIN FALLS ID 83303		1445 FILMORE ST. SUITE 1102 TWIN FALLS ID 83301 3. New Registered Agent Signature:*				
RECEIVED B		inoss Addross	es of President, Secretary, and Directors. Tre	and the factor of	ontional)				
Office Held	ei Names and bus Name	illess Audi essi	Street or PO Address	asurer (City	State	Country	Postal Code	
PRESIDENT	NATHAN C	DLSEN	PO BOX 5578		TWIN FALLS	ID	USA	83303	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signatur	Signature: Nathan Olsen		Date: 01/06/2016				
C 127635		Name (t	Name (type or print): Nathan Olsen			Title: President			
Processed 01/06/20	16	* Electronic	ally provided signatures are accepted as origi	inal signa	atures.				