| No. <b>C 195512</b>  |   | Due no later than Jul 31, 2017 Annual Report Form |   | 2. Registered Agent and Address (NO PO BOX) |         |             |  |
|--|---|---|---|---|---------|-------------|--|
| Return to:   |   |   |   | JOHN CHAPMAN                                |         |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | LMS DEFEN<br>JOHN CHA<br>148 BLUE L                                       |   | 148 BLUE LAKES BLVD N #396 TWIN FALLS ID 83301  3. New Registered Agent Signature:* |   |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |   |   |   |         |             |  |
| 4. Corporations: Enter Names and   | d Business Addresses  | of President, Secretary, and Directors. Treasur   | rer (optional).   |   |         |             |  |
| Office Held Name   |   | Street or PO Address                              | City  | State                                       | Country | Postal Code |  |
| PRESIDENT JOHN   | PRESIDENT JOHN CHAPMAN  |   | TWIN FALLS  | ID  | USA     | 83301       |  |
| SECRETARY JOHN   | CHAPMAN   | 148 BLUE LAKES BLVD N #396                        | TWIN FALLS  | ID  | USA     | 83301       |  |
| TREASURER JOHN   | CHAPMAN   | 148 BLUE LAKES BLVD N #396                        | TWIN FALLS  | ID  | USA     | 83301       |  |
| 5. Organized Under the Laws of: 6. Annu  |   | port must be signed.*                             |   |   |         |             |  |
| <b>№</b> Sig   |   | Signature: JEREMY L GOODING Date: 08/29/2017      |   |   |         |             |  |
| C 195512   | Name (type  | e or print): JEREMY L GOODING                     |   | Title: CPA                                  |         |             |  |
| Processed 08/29/2017   | * Electronically provided signatures are accepted as original signatures. |   |   |   |         |             |  |