

No. W 183293		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. DIVERSIFIED BACK OFFICE SOLUTIONS LLC PO BOX 175 OROFINO ID 83544		SHIRLEY D CUNNINGHAM #4 APPLE TREE LN OROFINO ID 83544-8354			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	SHIRLEY CUNNINGHAM	PO	OROFINO	ID	USA	83544	
5. Organized Under the Laws of: ID W 183293		6. Annual Report must be signed.* Signature: Amy Jared Name (type or print): Amy Jared					
		Date: 04/20/2018 Title: Bookkeeper					
Processed 04/20/2018 * Electronically provided signatures are accepted as original signatures.							