

|  |                    |   |             |   |         |             |  |
|--|--------------------|---|-------------|---|---------|-------------|--|
| No. <b>W 182572</b>  |                    | Due no later than May 31, 2018  |             | 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>RNR FABWORXS LLC<br>ANGELA ROWLAND<br>PO BOX 580<br>SPIRIT LAKE ID 83869<br>USA |             | CHAD ROWLAND<br>32848 N 6TH AVE<br>SPIRIT LAKE ID 83869 |         |             |  |
|  |                    |   |             | 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   | CHAD ROWLAND OWNER | 32848 N 6TH AVE.  | SPIRIT LAKE | ID  | USA     | 83869       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 182572</b>  |                    | 6. Annual Report must be signed.*<br>Signature: chad rowland<br>Name (type or print): chad rowland<br>Date: 05/29/2018<br>Title: owner/operator                                   |             |   |         |             |  |
| Processed 05/29/2018   |                    | * Electronically provided signatures are accepted as original signatures.   |             |   |         |             |  |