

|  |                 |   |       |  |         |             |  |
|--|-----------------|---|-------|--|---------|-------------|--|
| No. <b>W 38805</b>   |                 | <b>Due no later than Apr 30, 2016</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>ABC ROOFING LLC<br>JIM VARWIG<br>PO BOX 772<br>STAR ID 83669 |       | JAMES S VARWIG<br>79 N. ROBINSON RD.<br>NAMPA ID 83687 |         |             |  |
|  |                 |   |       | 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  | JAMES S VARWIG  | 79 N. ROBINSON RD.  | NAMPA | ID   | USA     | 83687       |  |
| MEMBER   | DEEANN B VARWIG | 79 N. ROBINSON RD.  | NAMPA | ID   | USA     | 83687       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 38805</b>   |                 | 6. Annual Report must be signed.*<br>Signature: Jim Varwig<br>Name (type or print): Jim Varwig                                |       |  |         |             |  |
|  |                 | Date: 05/24/2016<br>Title: Manager  |       |  |         |             |  |
| Processed 05/24/2016   |                 | * Electronically provided signatures are accepted as original signatures.   |       |  |         |             |  |