

|                                                                                                                                                        |                  |                                                                                                                                              |       |                                                             |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------|---------|------------------|--|
| No. <b>W 86657</b>                                                                                                                                     |                  | <b>Due no later than Sep 30, 2017</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>FLEXTECHS, LLC<br>LAURA E PETERSON<br>2539 S FIVE MILE RD<br>BOISE ID 83709 |       | LAURA E PETERSON<br>2539 S. FIVE MILE RD.<br>BOISE ID 83709 |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                              |       | 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                                                                                                                                                | LAURA E PETERSON | 7379 W RING PERCH DR                                                                                                                         | BOISE | ID                                                          | USA     | 83709            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                            |       |                                                             |         |                  |  |
| <b>ID<br/>W 86657</b>                                                                                                                                  |                  | Signature: Laura E Peterson                                                                                                                  |       |                                                             |         | Date: 07/24/2017 |  |
|                                                                                                                                                        |                  | Name (type or print): Laura E Peterson                                                                                                       |       |                                                             |         | Title: Finance   |  |
| Processed 07/24/2017                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                    |       |                                                             |         |                  |  |