| No. W 153792 | | Due no later than Jul 31, 2018 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|---|------------------|--|-------|---------|-------------|
| Return to: | | Annual Report Form | | MEGAN HOLCOMB | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this XTREME XCAVATION SERVICES LLC XTREME XCAVATIO 26700 MERLYNN LANE MIDDLETON ID 83644 | | 26700 MERLYNN LANE MIDDLETON ID 83644 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Ad | dress | City | State | Country | Postal Code |
| MEMBER NICK HOLCO | | MB 26700 MERLYNN | LANE | MIDDLETON | ID | USA | 83644 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Megan Holcomb | Date: 06/11/2018 | | | | |
| W 153792 | | Name (type or print): Megan Holcomb | | Title: Administrator | | | |
| Processed 06/11/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | |