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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------------|---------------------|
| No. <b>W 73140</b>                                                                                                                                     |                     | <b>Due no later than Apr 30, 2017</b>                                                                                                                |           | <b>2. Registered Agent and Address (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>SANDS PROPERTIES LLC<br>SUZANNE J. ROBERTS<br>5383 S FARMHOUSE PL<br>BOISE ID 83716 |           | SUZANNE J ROBERTS<br>5383 S FARMHOUSE PL<br>BOISE ID 83716-8371 |                     |
|                                                                                                                                                        |                     |                                                                                                                                                      |           | 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                                                                                                                                                | SUZANNE J ROBERTS   | 5383 S FARMHOUSE PL                                                                                                                                  | BOISE     | ID                                                              | 83716               |
| MANAGER                                                                                                                                                | SALLIE J THIBODEAUX | 1475 SW JASMINE TRACE                                                                                                                                | PALM CITY | FL                                                              | 34990               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 73140</b>                                                                                           |                     | 6. Annual Report must be signed.*<br>Signature: Suzanne J Roberts<br>Name (type or print): Suzanne J Roberts<br>Date: 02/25/2017<br>Title: Manager   |           |                                                                 |                     |
| Processed 02/25/2017                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                            |           |                                                                 |                     |