

|                                                                                                                                                        |                      |                                                                                                                                                                    |       |                                                                        |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 77982</b>                                                                                                                                     |                      | <b>Due no later than Sep 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>DBF FLIGHT SERVICE, LLC<br>DENNIS FITZPATRICK<br>800 W. MAIN STREET, SUITE 1200<br>BOISE ID 83702 |       | DENNIS FITZPATRICK<br>800 W. MAIN STREET, SUITE 1200<br>BOISE ID 83702 |         |                  |  |
|                                                                                                                                                        |                      |                                                                                                                                                                    |       | 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                                                                                                                                                | DENNIS B FITZPATRICK | 800 W. MAIN STREET, SUITE 1200                                                                                                                                     | BOISE | ID                                                                     | USA     | 83702            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                      | 6. Annual Report must be signed.*                                                                                                                                  |       |                                                                        |         |                  |  |
| <b>ID<br/>W 77982</b>                                                                                                                                  |                      | Signature: Terri Christensen                                                                                                                                       |       |                                                                        |         | Date: 07/25/2016 |  |
|                                                                                                                                                        |                      | Name (type or print): Terri Christensen                                                                                                                            |       |                                                                        |         | Title: Secretary |  |
| Processed 07/25/2016                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                                          |       |                                                                        |         |                  |  |