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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------------------|---------------------|
| No. <b>W 28500</b>                                                                                                                                     |                      | <b>Due no later than Feb 28, 2018</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>ALLEN COLLINS AGENCY L.L.C.<br>CHARLES R. BUERSTATTE<br>PO BOX 2132<br>POCATELLO ID 83206 |           | CHARLES R BUERSTATTE<br>1219 YELLOWSTONE AVE STE E<br>POCATELLO ID 83201 |                     |
|                                                                                                                                                        |                      |                                                                                                                                                                                             |           | 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 |
| MEMBER                                                                                                                                                 | CHARLES R BUERSTATTE | PO BOX 2132                                                                                                                                                                                 | POCATELLO | ID                                                                       | 83206               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 28500</b>                                                                                           |                      | 6. Annual Report must be signed.*<br>Signature: Charles R. Buerstatte<br>Name (type or print): Charles R. Buerstatte<br>Date: 01/08/2018<br>Title: Member                                   |           |                                                                          |                     |
| Processed 01/08/2018                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                                                                   |           |                                                                          |                     |