| No. W 124526 | | Due no later than Apr 30, 2015 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------|-----------------------------------------------|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. EDGE-ABILITY, LLC JOSEPH M JAMESEN PO BOX 52141 | | 720 N 55TH IDAHO FALLS | JOSEPH JAMESEN 720 N 55TH W IDAHO FALLS 83405 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar | | IDAHO FALLS ID 83405 mes and Addresses of at least one Member or Manager. | | 3. <u>New</u> Registe | 3. <u>New</u> Registered Agent Signature:* | | | |
| | ame | | Street or PO Address | City | State | Country | Postal Code | |
| | BRITTNEY K JAMESEN JOSEPH M JAMESEN | | PO BOX 52141 PO BOX 52141 | IDAHO FALLS IDAHO FALLS | ID ID | USA USA | 83405 83405 | |
| 5. Organized Under the Laws of: ID W 124526 | | 6. Annual Report Signature: JOS Name (type or | | Date: 03/28/2015 Title: MEMBER | | | | |
| Processed 03/28/2015 | * Electronically provided signatures are accepted as original signatures. | | | | | | | |